

सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की

खण्ड-21] रुड़की, शनिवार, दिनांक 07 नवम्बर, 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्) [संख्या-40

विषय—सूची

प्रत्येक भाग के पृष्ठ अलग-अलग दिये गए हैं, जिससे उनके अलग-अलग खण्ड बन सकें

विषय	पृष्ठ संख्या	वार्षिक चन्द
		₹0
सम्पूर्ण गजट का मूल्य	_	3075
भाग 1—विञ्जप्ति—अवकाश, नियुक्ति, स्थान–नियुक्ति, स्थानान्तरण,	•	
अधिकार और दूसरे वैयक्तिक नोटिस	1 239 —1 25 3	1500
भाग 1-क-नियम, कार्य-विधियां, आज्ञाएं, विज्ञप्तियां इत्यादि जिनको		
उत्तराखण्ड के राज्यपाल महोदय, विभिन्न विभागों के		
अध्यक्ष तथा राजस्व परिषद् ने जारी किया	447481	1500
भाग 2-आज्ञाएं, विज्ञप्तियां, नियम और नियम विधान, जिनको केन्द्रीय		
सरकार और अन्य राज्यों की सरकारों ने जारी किया, हाई		
कोर्ट की विज्ञप्तियां, भारत सरकार के गजट और दूसरे		•
राज्यों के गजटों के उद्धरण	_ `	975
भाग 3—स्वायत्त शासन विभाग का क्रोड़-पत्र, नगर प्रशासन, नोटीफाइड		
्एरिया, टाउन एरिया एवं निर्वाचन (स्थानीय निकाय) तथा		•
पंचायतीराज आदि के निदेश जिन्हें विभिन्न आयुक्तों		
अथवा जिलाधिकारियों ने जारी किया		975
भाग 4—निदेशक, शिक्षा विभाग, उत्तराखण्ड		975
भाग ५-एकाउन्टेन्ट जनरल, उत्तराखण्ड	- .	975
भाग 6-बिल, जो भारतीय संसद में प्रस्तुत किए गए या प्रस्तुत किए	, ·	
जाने से पहले प्रकाशित किए गए तथा सिलेक्ट कमेटियों		
की रिपोर्ट	<u>-</u>	975
भाग 7—इलेक्शन कमीशन ऑफ इण्डिया की अनुविहित तथा अन्य	•	-
निर्वाचन सम्बन्धी विज्ञप्तियां		975
भाग 8-सूचना एवं अन्य वैयक्तिक विज्ञापन आदि	335	975
स्टोर्स पर्चेज-स्टोर्स पर्चेज विभाग का क्रोड-पत्र आदि	_	1425

भाग 1

विज्ञप्ति—अवकाश, नियुक्ति, स्थान—नियुक्ति, स्थानान्तरण, अधिकार और दूसरे वैयक्तिक नोटिस सूक्ष्म, लघु एवं मध्यम उद्यम अनुभाग

कार्यालय-ज्ञाप

28 सितम्बर, 2020 ई0

संख्या 1621/VII-3-20/146—एम0एस0एम0ई0/2013 टी०सी० 03—वर्तमान में उत्तराखण्ड राज्य में औद्योगिक इकाईयों को प्रोत्साहन हेतु प्रदेश की सूक्ष्म, लघु एवं मध्यम उद्यम नीति—2015 (यथासंशोधित—2016, 2018 व 2019) तथा उसमें प्रदत्त वितीय प्रोत्साहनों की अनुमन्यता के लिए शासन की अधिसूचना दिनांक 03 दिसम्बर, 2015 से प्रख्यापित सूक्ष्म, लघु एवं मध्यम उद्यम क्रियान्वयन आदेश—2015 में भारत सरकार की अधिसूचना संख्या—का०आ० 1702(अ) दिनांक 01 जून, 2020 द्वारा सूक्ष्म, लघु एवं मध्यम उद्यम की परिभाषा परिवर्तन के अनुरूप उक्त नीति व क्रियान्वयन आदेश के परिभाषा शीर्षक में निम्नानुसार संशोधन किये जाने की श्री राज्यपाल महोदय सहर्ष स्वीकृति प्रदान करते हैं।

2. सूक्ष्म, लघु एवं मध्यम उद्यम नीति तथा क्रियान्वयन आदेश—2015 में परिभाषा शीर्षक में स्तम्भ—1 के स्थान पर स्तम्भ—2 में दिये गये प्राविधान रख दिये जायेंगे अर्थात् :—

		स्तम्म–1	स्तस्म–2					
- 		वर्तमान प्राविधान	एतद्द्वारा प्रतिस्थापित प्राविधान					
II	विनिर्मा	णक/उत्पादक उद्यम:	(क)	सूक्ष्म उद्यम वह है जिसमें संयंत्र और मशीनरी				
	(ক)	एक सूक्ष्म उद्यम, जहां संयंत्र और		अथवा उपस्कर में एक करोड़ रूपये से अधिक				
		मशीनरी में विनिधान पच्चीस लाख		का निवेश नहीं होता है तथा उसका कारोबार				
		रूपये से अधिक न हो।		पांच करोड़ रूपये से अधिक नहीं होता हैं।				
	(ख)	एक लघु उद्यम, जहां संयंत्र और	(ख)	लघु उद्यम वह है जिसमें संयंत्र और मशीनरी				
		मशीनरी में विनिधान पच्चीस लाख		अथवा उपस्कर में दस करोड़ रूपये से अधिक				
	•	रूपए से अधिक हो किन्तु पांच करोड़		का निवेश नहीं होता है तथा उसका कारोबार				
		से अधिक न हो, या		पचास करोड़ रूपये से अधिक नहीं होता है।				
	(ग)	एक मध्यम उद्यम, जहां संयंत्र और	(ग)	मध्यम उद्यम वह है जिसमें संयंत्र और मशीनरी				
		मशीनरी में विनिधान पांच करोड़ रूपए		अथवा उपस्कर में पचास करोड़ रूपये से अधिव				
		से अधिक हो परन्तु दस करोड़ रूपए		का निवेश नहीं होता है तथा उसका कारोबा				
		से अधिक न हो।	_	दो सौ पचास करोड़ रूपये से अधिक नहीं होत				
Ш	सेवा	प्रदाता उद्यमः-		- है। 				
	(ক)	एक ऐसे सूक्ष्म उद्यम के रूप में जह						
		उपकरण में विनिधान दस लाख रूपरे	1					
		से अधिक न हो,						
	(ख)	एक ऐसे लघु उद्यम के रूप में जह	i					

	उपकरण में विनिधान दस लाख रूपए से अधिक हो किन्तु दो करोड़ रूपये से अधिक न हो, या	:	1	
(ग)	एक ऐसे मध्यम उद्यम के रूप में जहां उपकरण में विनिधान दो करोड़ रूपये से अधिक हो किन्तु पांच करोड़ से अधिक न हो।			

- 3. उक्त संशोधित नीति की नयी परिभाषा 01 जुलाई, 2020 से लागू मानी जायेगी।
- 4. उत्तराखण्ड सूक्ष्म, लघु एवं मध्यम उद्यम नीति एवं क्रियान्वयन आदेश—2015 उपरोक्त सीमा तक संशोधित समझा जाय। नीति में शेष प्राविधान यथावत रहेंगे।

आज्ञा से, मनीषा पंवार, अपर मुख्य सचिव।

वन अनुभाग-02

अधिसूचना

05 अक्टूबर, 2020 ई0

संख्या 1710/X-2-2020—19(04) 2014 T.C.—मा० मुख्यमंत्री जी की अध्यक्षता में दिनांक 29 जून, 2020 को सम्पन्न उत्तराखण्ड राज्य वन्यजीव सलाहकार बोर्ड की 15वीं बैठक में लिये गये निर्णय तथा वन्य जीव (संरक्षण) अधिनियम, 1972 यथा संशोधित की धारा—7(2) के प्राविधानों के अन्तर्गत निम्न प्रकार राज्य वन्यजीव सलाहकार बोर्ड के सदस्यों में से 'स्थायी समिति' का गठन किए जाने की स्वीकृति श्री राज्यपाल सहर्ष स्वीकृति प्रदान करते हैं —

क.सं.	राज्य वन्यजीव सलाहकार बोर्ड की 'स्थायी समिति'	पद	अभ्युक्ति
1.	मा० वन एवं पर्यावरण मंत्री।	अध्यक्ष	
2.	मा० सदस्य, विधान सभा, उत्तराखण्ड	सदस्य	मा० मुख्यमंत्री जी द्वारा नामित मा० विधान सभा सदस्य।
3.	निदेशक, भारतीय वन्यजीव संस्थान अथवा उनके द्वारा नामित प्रतिनिधि।	सदस्य	
4.	प्रमुख सचिव / सचिव वन, उत्तराखण्ड शासन।	सदस्य	
5.	मुख्य कार्यकारी अधिकारी, उत्तराखण्ड पर्यटन विकास परिषद अथवा उनके द्वारा नामित प्रतिनिधि।	स्रदस्य	
6.	सचिव, जनजाति कल्याण अथवा उनके द्वारा नामित प्रतिनिधि।	सदस्य	

7.	मा० मुख्यमंत्री जी द्वारा नामित एक गैर - सरकारी संगठन।	सदस्य	अधिकतम ०। वर्ष	
8.	मा० मुख्यमंत्री जी द्वारा नामित एक सुविख्यात संरक्षण विज्ञानी, पारिस्थितिकी विज्ञानी और पर्यावरण विज्ञानी।	सदस्य	अधिकतम ०१ वर्ष	
9.	मुख्य वन्यजीव प्रतिपालक, उत्तराखण्ड।	सदस्य सचिव		

- 2— उक्त स्थायी समिति की बैठक प्रतिमाह आयोजित की जायेगी। राष्ट्रीय वन्यजीव सलाहकार बोर्ड की स्थायी समिति को प्रेषित किये जाने वाले समस्त प्रकरणों को इस स्थायी समिति के समक्ष विचारार्थ प्रस्तुत किया जायेगा एवं इसके निर्णयोपरान्त अग्रेत्तर कार्यवाही की जायेगी।
- 3- स्थायी समिति के समस्त निर्णयो / बैठकों के कार्यवृत्त को आगामी राष्ट्रीय वन्यजीव सलाहकार बोर्ड की बैठक में संज्ञानार्थ / अनुमोदनार्थ / आदेशार्थ प्रस्तुत किये जायेंगे।
- 4- यह अधिसूचना गजट में प्रकाशित होने की तिथि से प्रवृत्त होगी।

आज्ञा से,

आनन्द बर्द्धन, प्रमुख सचिव।

चिकित्सा स्वास्थ्य एवं चिकित्सा शिक्षा अनुभाग-05

अधिसूचना

<u>प्रकीर्</u>ण

28 सितम्बर, 2020 ई0

संख्या 1065/XXVIII(5)/20—22 (सामान्य)/2015—राज्यपाल "भारत का संविधान" के अनुच्छेद 309 के परन्तुक द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग (अराजपत्रित) सेवा नियमावली, 2020 में संशोधन करने की दृष्टि से निम्नलिखित नियमावली बनाते है :--

उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग (अराजपत्रित) (संशोधन) सेवा नियमावली. 2020

भाग-1 - सामान्य

संक्षिप्त नाम 1 (1) इस नियमावली का संक्षिप्त नाम उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) नर्सिंग संवर्ग और प्रारम्भ (अराजपत्रित) सेवा नियमावली (संशोधन), 2020 है। (2) यह तुरन्त प्रवृत्त होगी।

नियम 5(ख) 2 उत्तराखण्ड चिकित्सा शिक्षा विभाग (मेडिकल कॉलेज) निर्संग संवर्ग (अराजपत्रित) सेवा नियमावली, का 2020 (जिसे यहाँ आगे मूल नियमावली कहाँ गया है) में नीचे स्तम्भ 1 में दिये गये विद्यमान नियम संशोधन 5(ख) के स्थान पर स्तम्भ 2 में दिया गया नियम रख दिया दिया जाएगा, अर्थात:—

स्तम्भ-1

विद्यमान नियम

एतदद्वारा प्रतिस्थापित नियम

5(ख) स्टाफ नर्स : शत-प्रतिशत सीधी भर्ती द्वारा 5(ख) स्टाफ नर्स (उपचारिका): 80 प्रतिशत कुल पदों का 80 प्रतिशत महिला उपचारिका और महिला अभ्यर्थियों में से तथा 20 प्रतिशत पद पुरूष 20 प्रतिशत पुरूष उपचारक होंगे। चयन वर्ष में अभ्यर्थियों में से सीधी भर्ती द्वारा, चयन वर्ष में महिला / पुरूष उपचारिकाओं / उपचारकों के कुल महिला / पुरूष उपचारिकाओं / उपचारकों के कुल उपलब्ध रिक्त पदों में से 70 प्रतिशत पद जनरल उपलब्ध रिक्त पद नर्सिंग में डिप्लोमाधारक / नर्सिंग एवं मिडवाइफरी में डिप्लोमा धारक डिग्रीधारक अभ्यर्थियों में से भरे जायेंगे।

धारक अभ्यर्थियों से भरे जायेंगे।

नियम का संशोधन मूल नियमावली के नियम 8 के स्तम्भ-1 के स्थान पर स्तम्भ-2 में दिया गया नियम रख दिया जायेगा, अर्थात:—

स्तम्भ-1

अभ्यर्थियों तथा 30 प्रतिशत पद नर्सिंग में डिग्री

विद्यमान नियम

अभ्यर्थी के पास निम्न अर्हताएँ होनी आवश्यक है अभ्यर्थी के पास निम्न अर्हताएँ होनी आवश्यक है

स्टाफ नर्स:-

- माध्यमिक शिक्षा परिषद, उत्तराखण्ड से (ক) उत्तीर्ण इण्टरमिडिएट परीक्षा सरकार द्वारा उसके समकक्ष मान्यता प्राप्त परीक्षा उत्तीर्ण होना चाहिए। इसके साथ ही किसी मान्यता प्राप्त संस्थान से जनरल नर्सिंग एवं मिडवाइफरी में डिप्लोमा अथवा बी०एस०सी० (नर्सिग) परीक्षा उत्तीर्ण की गयी हो।
- अभ्यर्थी के पास उत्तराखण्ड नर्स तथा धात्री परिषद में रजिस्ट्रीकरण के योग्य जनरल नर्सिंग एवं मिडवाइफरी का डिप्लोमा अथवा बी0एस0सी0 नर्सिंग की डिग्री बी०एस०सी० नर्सिंग के डिग्रीधारकों के पास राज्य सरकार के चिकित्सा संकाय द्वारा मान्यता प्राप्त संस्थान से कम से केम 01 वर्ष का नर्सिंग कार्य का अनुभव होना (ख) आवश्यक है।
- (ग) नर्सिंग काउन्सिल, उत्तराखण्ड में रजिस्ट्रीकृत हो।

स्तम्भ-2

एतदद्वारा प्रतिस्थापित नियम 8-सेवा में सीधी भर्ती के लिए यह आवश्यक है कि 8-सेवा में सीधी भर्ती के लिए यह आवश्यक है कि

स्टाफ नर्स:-

- (क) भारतीय नर्सिंग परिषद् से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से नर्सिंग में बी०एस०सी०(आनर्स), अथवा भारतीय नर्सिंग परिषद से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से बी०एस०सी० नर्सिंग में नियमित पाठ्यकम अथवा भारतीय नर्सिंग परिषद से मान्यता प्राप्त विश्वविद्यालय अथवा संस्थान से पोस्ट बेसिक बी०एस०सी० नर्सिंग अथवा भारतीय नर्सिंग परिषद् से मान्यता प्राप्त विश्वविद्यालय से जनरल नंर्सिंग एवं मिडवार्डफरी / मनोरोग विज्ञान का डिप्लोमा
 - ंउत्तराखण्ड/भारतीय नर्सिंग तथा धात्री परिषद् से बी०एस०सी० (आनर्स) अथवा बी०एस०सी० नर्सिंग अथवा पोस्ट बेसिक बी०एस०सी० नर्सिंग अथवा जनरल नर्सिंग एवं मिडवाइफरी/मनोरोग विज्ञान के रूप में रजिस्टीकरण का प्रमाण पत्र हो।
- (ग) किसी राजकीय चिकित्सालय अथवा नैदानिक (रजिस्ट्रीकरण और स्थापन अधिनियम 2010) (2010 का अधि0सं 23) के अन्तर्गत रजिस्ट्री 30 शैय्यायुक्त निजी चिकित्सालय में न्यूनतम 01 वर्ष कार्य का अनुभव उक्त योग्यता को प्राप्त करने के उपरान्त हो.
- (घ) हिन्दी का कार्यसाधक ज्ञान हो।

नियम 16 4 मूल नियमावली के नियम 16 के नीचे स्तम्म-1 में दिये गये विद्यमान नियम के स्थान पर स्तम्भ-2 में का संशोधन दिया गया नियम रख दिया जाएगा, अर्थात:--

स्तम्म-1

विद्यमान नियम

16—सेवा में सीधी भर्ती पदों पर भर्ती उत्तराखण्ड (लोक सेवा आयोग को क्षेत्र के बाहर) समूह 'ग' के पदों पर सीधी भर्ती प्रक्रिया नियमावली, 2008 , (समय—समय पर यथासंशोधित) में निहित उपबन्धों के अधीन उत्तराखण्ड अधीनस्थ सेवा चयन आयोग के माध्यम से की जायेगी।

स्तम्भ-2

एतद्द्वारा प्रतिस्थापित नियम 16—नियुक्ति प्राधिकारी / चिकित्सा सेवा चयन बोर्ड सीधी भर्ती के लिए निम्नलिखित रिति से आवेदन पत्र का प्रारूप और रिक्तियाँ अधिसूचित करेगाः—

- क) न्यूनतम ऐसे दो दैनिक समाचार पत्रों में जिनका व्यापक परिचालन हो, विज्ञापन जारी करके.
- ख) कार्यालय के सूचना पट्ट पर सूचना चस्पा करके या रेडियों / दूरदर्शन अथवा अन्य रोजगार पत्र द्वारा विज्ञापन के माध्यम से।
- (ग) रोजगार कार्यालय को रिक्तियाँ अधिसूचित कर।
- (2) चयन के लिए लिखित परीक्षा 200 अंकों की वस्तुनिष्ठ प्रकार की होगी, जिसमें 100 अंक का एक प्रश्न पत्र नर्सिंग से सम्बन्धित विषय से होगा तथा 100 अंक का दूसरा प्रश्न पत्र सामान्य हिन्दी, सामान्य ज्ञान एवं सामान्य अध्ययन का होगा। प्रश्न पत्र के मूल्यांकन में प्रत्येक सहीं उत्तर का एक अंक व प्रत्येक गलत उत्तर हेतु 1/4 ऋणात्मक अंक विया जायेगा।
- (3) लिखित परीक्षा की प्रश्न बुकलेट, परीक्षा के पश्चात, अभ्यर्थियों को अपने साथ ले जाने की अनुमति दी जायेगी।
- (4) लिखित परीक्षा के पश्चात, लिखित परीक्षा की उत्तरमाला (Answer Key) उत्तराखण्ड चिकित्सा सेवा चयन बोर्ड की वैबसाईट www.ukmssb.org पर प्रदर्शित की जायेगी या दैनिक समाचार पत्र में, जिसका व्यापक परिचालन है. पर प्रकाशित की जायेगी।
- (5) लिखित परीक्षा की उत्तरशीट (Answer Sheet) कार्बन प्रति के साथ डुप्लीकेट में होगी तथा डुप्लीकेट प्रति अभ्यर्थी को अपने साथ ले जाने की अनुमति दी जायेगी।
- (6) लिखित परीक्षा के प्राप्तांकों की प्रवीण्ता सूची में अनारक्षित व अन्य पिछडा वर्ग के अभ्यर्थियों की दशा में न्यूनतम 45 प्रतिशत अंक तथा अनुसचित जाति एवं अनुसूचित जनजाति श्रेणी के अभ्यर्थियों की दशा में न्यूनतम 35 प्रतिशत अंक प्राप्त किये अभ्यर्थियों को ही सम्मिलत किया जायेगा।

- (7) नैदानिकी स्थापन (रिजस्ट्रीकरण और विनियमन) अधिनियम, 2010 (2010 का अधि०सं० 23) (सम्बन्धित राज्य में यथाप्रवृत्त) के अन्तर्गत पंजीकृत चिकित्सा संस्थान से परिशिष्ट—ग के अनुसार प्राप्त नर्सिंग का क्लीनिकल अनुभव प्रमाण पत्र रखने वाले अभ्यर्थी को प्रति वर्ष अनुभव के आधार पर न्यूनतम 01 अंक और अधिकतम 05 अंक निम्नलिखित प्रतिबन्धों एवं शर्तों के अधीन देय होंगे।
- (क) अनुभव न्यूनतम 01 वर्ष का होना चाहिये 01 वर्ष से कम की अवधि के अनुभव हेतु कोई भी अंक देय नहीं होगा, 01 वर्ष की अवधि का अनुभव पूर्ण होने के पश्चात प्रत्येक अतिरिक्त माह हेतु अंक का निर्धारण निम्नलिखित सूत्र के अनुसार होगा, तथा अनुभव के अंक, अनुभव के कुल माह की संख्या / 12 उदाहरण :—1 वर्ष 06 माह हेतु अनुभव के अंक का निर्धारण:—
- 01 वर्ष हेतु कुल अंक = 01
- 06 माह हेतु कुल अंक 6/12 = 0.5
- 01 वर्ष 06 माह हेतु कुल अंक = 1.5
- (ख) अभ्यर्थी द्वारा आवेदन पत्र के साथ प्रस्तुत नियोक्ता द्वारा अभ्यर्थी को प्रदत्त अनुभव प्रमाण पत्र में सम्बन्धित चिकित्सालय का उनके राज्य में यथाप्रवृत्त नैदानिकी स्थापन (रजिस्ट्रीकरण और विनियमन) अधिनियम, 2010 (2010 का अधि०सं० 23) (सम्बन्धित राज्य में यथाप्रवृत्त) के अन्तर्गत चिकित्सालय की पंजीकरण संख्या एवं दिनांक अंकित की गयी हो तथा नियोक्ता द्वारा अभ्यर्थी को चिकित्सालय में नर्सिंग का क्लीनिकल कार्य किये जाने का स्पष्ट उल्लेख किया गया हो, जिसमें विभागों (यथा—सर्जरी/गायनी/बालरोग/आई०सी०यू०) इत्यादि, जहाँ अभ्यर्थी द्वारा कार्य किया गया हो, का भी उचित रूप से उल्लेख हो, नॉन क्लीनिकल कार्य हेतु अनुभव का कोई अंक प्रदान नहीं किया जायेगा, तथा
- (ग) अभ्यर्थी को आवेदन पत्र के साथ सम्पूर्ण अनुभव अवधि का न्योक्ता द्वारा आयकर अधिनियम के अन्तर्गत प्रदत्त फार्म—16 प्रस्तुत करना अनिवार्य होगा, अनुभव के अंक प्रदान किये जाने हेतु केवल उस अवधि की गणना की जायेगी जिस अवधि हेतु अभ्यर्थी द्वारा नियोक्ता द्वारा उसे प्रदत्त फार्म—16 प्रस्तुत किया गया हो।

(8) उत्तराखण्ड चिकित्सा सेवा चयन बोर्ड डिप्लोमा तथा डिग्रीधारक अभ्यर्थियों (महिला एवं पुरूष) की योग्यताकम में, जैसा कि उनके द्वारा लिखित परीक्षा एवं प्रस्तुत अनुभव प्रमाण पत्र में प्राप्त अंकों से प्रकट हो, पृथक—पृथक सूचियां तैयार करेगा। यदि दो या अधिक अभ्यर्थी समान अंक प्राप्त करे तो बोर्ड उनके नाम अभ्यर्थी की आयु, जिसकी जन्मतिथि पहले हो उसका नाम पहले, के

(9) सूची में नामों की संख्या रिक्तियों की संख्या से अधिक (किन्तु 25 प्रतिशत से अधिक नहीं) होगी। इस प्रकार तैयारी की गयी सूची केवल एक वर्ष के लिए मान्य होगी तथा जिसे प्रतीक्षा सूची कहा जायेगा। बोर्ड सूची में अपेक्षित संख्या में अभ्यर्थियों के नाम योग्यता कम में, नियुक्ति प्राधिकारी को अग्रसारित करेगा।

नियम 27 का संशोधन 5 मूल नियमावली के नियम 27 में शब्द "अन्य पिछड़े वर्ग" के पश्चात् शब्द "आर्थिक रूप से कमंजोर वर्ग" को अन्तः स्थापित कर दिया जायेगा /

परिशिष्ट — ग (नियम—16(7) देखें) चिकित्सालय का लैटर हैड

पत्र संख्याः--

दिनांक:-

-: अनुभव प्रमाण-पत्र :--

	प्रमाणित किया जाता है कि श्री/श्रीमती/कु0
	पुत्र / पुत्री / पत्नी
	निवासीइस चिकित्सालय में उपचारिका के पद पर
	कार्यरत है, साथ ही यह भी प्रमाणित किया जाता है कि (चिकित्सालय का नाम एवं पता जनपद
	सहित)वर्तमान में (शैय्याओं की
	संख्या)शैय्या युक्त है एवं (राज्य का नाम)राज्य में लागृ
	नैदानिक स्थापन (रजिस्ट्रीकरण और विनियम अधिनियम, 2010) के अन्तर्गत (कार्यालय का नाम जहाँ
	पंजीकृत है)में आतिथि तक वैध रूप से पंजीकृत है एवं चिकित्सालय
	का पंजीकरण संख्या–एवं दिनांकहै।
2-	श्री/श्रीमती/कु0द्वारा इस चिकित्सालय में कार्य किये जाने की अवधि
	में (विभाग का नाम)निर्संग का क्लीनिकल कार्य सम्पादित किया गया।
3—	श्री/श्रीमती/कु0द्वारा क्लीनिकल स्टाफ नर्स के रूप में इस
	चिकित्सालय में कार्य किये जाने की अवधि (दिनांक)में
	(दिनांक)माह एवंमाह एवं
	दिन है तथा उन्हें उक्त अवधि का अनुभव प्रमाण-पत्र निर्गत किया जा रहा है।
4	श्री / श्रीमती / कु0को उक्त अनुभव अवधि का आयकर अधिनियम के अन्तर्गत
	फार्म—16 प्रदान कर दिया गया है।
5	उक्त अवधि में श्री / श्रीमती / कुं0
-	पुत्र/पुत्री/पंत्नीनवासीका
	कार्य एवं आचरणरहा है।
	हस्ताक्षरः—
अन	भिव प्रमाण-पत्र निर्गत करने वाले सक्षम प्राधिकारी का नाम एवं पदनाम मुहर सहित (स्पष्ट पठनीय

अनुमव प्रमाण-पत्र निर्गत करने वाले सक्षम प्राधिकारी का नाम एवं पदनाम मुहर सहित (स्पष्ट पठनीय अक्षरों में) (चिकित्सक होने की दशा में एम0सी0आई0 पंजीकरण संख्या)

> आज्ञा से, अमित सिंह नेगी, सचिव।

In pursuance of the provisions of clause (3) of Article 348 of "the Constitution of India", the Governor is pleased to order the publication of the following English translation of Notification No. 1065/XXVIII(5)/20-22 (General)/2015, dated September 28, 2020 for general information.

NOTIFICATION Miscellaneous

September 28, 2020

No. 1065/XXVIII(5)/20-22 (General)/2015--In exercise the powers conferred by the proviso of article 309 of "the Constitution of India", the Governor pleased to makes the following rules with a view to amend The Uttarakhand Medical Education Department Nursing Cadre (Non-Gazetted) Service Rules, 2020:--

The Uttarakhand Medical Education Department (Medical College) Nursing Cadre (Non-Gazetted) (Amendment) Service Rules, 2020

Short title and 1. Commencement

- (1) These rules may be called the Uttarakhand Medical Education Department(Medical College)
 Nursing Cadre (Non-Gazetted) Service
 (Amendment) Rules, 2020
- (1) They shall come into force at once.

Amendment of 2.

In the Uttarakhand Medical Education Department Nursing Cadre (Non-Gazetted) Service Rules, 2020 (hereinafter referred to as the principal Rules) for the existing sub-rule (b) of rule 5 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

Column-1 Existing rule

Column-2 Rules hereby substituted

5(b) For Staff Nurse 80

percent female candidate
Female Nurse and 20 percent
Male candidate Male nurse
shall be filled through Direct
Recruitment, out of total
available vacant seat of
female nurses / male nurses in

5(b) Staff Nurse(Upcharika)- 80 percent from female candidates and 20 percent post from male candidates shall be filled through Direct Recruitment from diploma holder/degree holder candidates in nursing, out of total available vacant female nurses / male nurses post in the selection year.

3.

the selection year, 70 percent post from diploma holder candidates in nursing and 30 percent seats from degree holder candidates in nursing.

Amendment of Rule 8

Column-1 Existing rule

- 8. For Direct recruitment in the post of staff nurse the candidate:-
- (a) Should have passed examination Intermediate from Council of Secondary Education Uttarakhand or its recognized equivalent examination. As well as have passed Diploma in General Nursing and Midwifery or in B.Sc. have degree (Nursing) from any recognized institution.
- qualified for To be registration the in Uttarakhand Nurses and Midwives Council, candidate Diploma shall have General Nursing and Midwives or have Degree in

In the principal Rules, for the existing rule 8 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

Column-2

Rules hereby substituted 8. For direct recruitment in the post of

- staff nurse the candidate must have; (a) B.Sc. (Honors) in nursing from the University or Institute recognized from India Nursing Council or Regular course in B.Sc. nursing from the University or Institute recognized from Indian Nursing Council or Regular course in B.Sc. nursing from the University or Institute recognized from Indian Nursing Council or Post Basic B.Sc. nursing from the University or recognized from Indian Institute Nursing Council or Diploma of General Nursing and Midwives/Psychiatry from the University or Institute recognized
- (b) Certificate of registration as a B.Sc. (Honors) or B.Sc. Nursing OR Post Basic B.Sc. Nursing or General Nursing and Midwives/Psychiatry from Uttarakhand/ Indian Nursing and Midwives Council

from Indian Nursing Council.

4.

- B.Sc. Nursing. B.Sc. nursing degree holder must have minimum one year experience in nursing work from the institute recognized by State Government Medical faculty.
- (c) Shall have registered from Uttarakhand Nursing Council.

Amendment of Rule 16

Column-1 Existing rule

16.-For Direct Recruitment on the post shall be made through the Uttarakhand **Subordinate Service Selection** Commission under the provision as vested in the Uttarakhand Procedure for Direct Recruitment for Group "C" Posts (Outside the purview of Uttarakhand Public Service Commission) Rules, 2020.

- (c) After acquiring said qualification shall have minimum one year work experience in any Government Hospital or 30 Bedded Private Hospital registered under Clinical Establishments (Registration and Regulation) Act, 2010, (Act No. 23 of 2010).
- (4) Shall have working knowledge of Hindi.
- In the principal Rules, for the existing rule 16 as set out in column-1 below as set out in column-2, shall be substituted, namely:-

<u>Column-2</u> Rules hereby substituted

- 16.- (1) For Direct Recruitment Appointing Authority shall notify the format of application letter and vacancies in following manner:-
- (a) by issuing an advertisement in minimum two Daily News Papers which has wide circulation;
- (b) by pasting the notice in the Notice Board of office OR by advertising through Radio/ Doordarshan and other employment papers; and
- © by notifying the vacancies to Employment Office;
- (2) For selection the written examination shall be objective type of 200 marks, in which one question paper of 100 marks shall be of subject related to nursing and second question paper of 100 marks shall be of General Hindi, General Knowledge and General Studies. In evaluation of question paper

one marks for every correct answer and for every wrong answer 1/4 negative marks shall be given.

- (3) Candidate shall be given permission to take the question booklet of written examination with him/her, after the examination.
- (4) After the written examination, the answer key of written examination shall be displayed in the Uttarakhand Medical Service Selection Board website www.ukmssb.org or shall be publish, in the daily news paper, which has wide circulation.
- (5) The answer sheet of written examination shall be in duplicate with a carbon copy and the permission shall be given to candidate to take the duplicate copy with him/her.
- (6) In case candidates of unreserved or other backward class minimum 45 percent marks and in case of Scheduled Caste and Scheduled Tribe category minimum 35 candidates percent marks shall be included in the Merit List of scores of written examination.
- (7) Subject to the following terms and conditions minimum 01 -mark and maximum 05 marks on the basis of per year experience shall be awarded to candidate who have clinical experience certificate of Nursing, as per the

Appendix "C", from the institution registered under the Clinical Establishments (Registration and Regulation) Act, 2010, (Act No. 23 of 2010) (as applicable in concerned State).

(a) Experience should be of minimum one year, for the experience of period less than one year, no mark shall be awarded, after completion of one year period experience, fixation of mark for each extra month shall be in accordance to following formula:- Marks of experience = Total number of month/12 Example:- Fixation of experience for 01 year, 06 months

Total marks for 01 year= 01

Total marks for 6 months= 6/12=0.5

Total marks for 1 year 06 month= 1.5

(b) An experience certificate issued by the employer to the candidate and submitted by the candidate with application form, must have entry of the registration number of the Hospital under the Clinical Establishments (Registration and Regulation) Act, 2010, as applicable in the concerned State of concerned Hospital and the Date and the employer must have clearly mentioned the clinical work of nursing done by the candidate in the hospital, in which Departments (as-Surgery, Gyneo/ Paediatrics,/ICU etc., where candidate has done a work) properly mentioned. No mark shall be awarded for the experience of Non Clinical work.

- (c) It shall be mandatory for candidate to submit with application letter a Form-16 issued by the employer under Income Tax Act, for awarding marks of experience only that period shall be counted, for the period candidate has submitted Form-16 issued by employer.
- (8) The Uttarakhand Medical Service Board shall prepare separate lists of Diploma and Degree candidates (Male and Female) in Order of Merit, as appear from the marks they scored in written exam and from the marks obtained in the experience certificate. In case two or more candidate score equal mark, then, the Selection Board shall place the name in Order of Merit based on candidate age, whose date of birth is first his/her name first.
- (9) Number of names in list shall be more than the number of vacancies (but not more than 25 percent). The list prepared in this way shall be valid only for one year and which shall be called as waiting list. Board shall forward in required number the candidates name in order of merit to Appointing Authority.

Amendment of rule 27

In rule 27 of principal Rules, after the word "Other Backward Class" the words "Economically Weaker Sections" shall be inserted.

By Order,

AMIT SINGH NEGI,

Secretary.

पी०एस0यू0 (आर0ई0) 40 हिन्दी गजट/532-माग 1-2020 (कम्प्यूटर/रीजियो)।

5.



सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की, शनिवार, दिनांक 07 नवम्बर 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्)

भाग 1-क

नियम, कार्य-विधियां, आज्ञाएं, विज्ञप्तियां इत्यादि जिनको उत्तराखण्ड के राज्यपाल महोदय, विभिन्न विभागों के अध्यक्ष तथा राजस्व परिषद् ने जारी किया

कार्यालय राज्य कर आयुक्त, उत्तराखण्ड

(विधि-अनुभाग)

22 सितम्बर, 2020 ई0

ज्वाइण्ट कमिश्नर (कार्य0), राज्य कर, देहरादून/हरिद्वार/रुद्रपुर/हल्द्वानी सम्भाग।

पत्रांक 2200/रा0कर आयु0 उत्तरा0/विधि—अनुमाग/Noti.Vol.I/2020—21/देहरादून—उत्तराखण्ड शासन वित्त अनुमाग 8 द्वारा जारी अधिसूचना संख्याएं 688/2020/6(120)/XXVII(8)/2020/CT-60; 689/2020/6(120)/XXVII(8)/2020/CT-61; 690/2020/5(120)/XXVII(8)/2020/CTR-62; समदिनांकित 16 सितम्बर, 2020 का संदर्भ ग्रहण करें, जिनके द्वारा क्रमशः उत्तराखण्ड माल और सेवा कर (नौवां संशोधन) नियम, 2020; शासन की अधिसूचना संख्या 330/2020 दिनांक 20 मई, 2020 में अग्रेतर संशोधन तथा उत्तराखण्ड माल और सेवा कर (दसवां संशोधन) नियम, 2020 अधिसूचित किया गया है।

उपरोक्त अधिसूचनाओं की प्रति आपको इस आशय से प्रेषित है कि उक्त की अतिरिक्त प्रतियां कराकर अपने अधीनस्थ समस्त कर-निर्धारण अधिकारियों को आवश्यक कार्यवाही करने हेतु तथा बार एसोसिएशन के पदाधिकारियों / व्यापारी संगठनों के अध्यक्ष / सचिव को सूचनार्थ उपलब्ध कराने का कष्ट करें।

वित्त अनुभाग-8 अधिसूचना

16 सितम्बर, 2020 ई0

संख्या 688 / 2020 / 6(120) / XXVII(8) / 2020 / CT-60—राज्यपाल, उत्तराखण्ड माल और सेवा कर अधिनियम, 2017 (अधिनियम संख्या 06, वर्ष 2017) की धारा 164 द्वारा प्रवत्त शक्तियों का प्रयोग करते हुए, परिषद् की सिफारिशों पर, उत्तराखण्ड माल और सेवा कर नियम, 2017 को अग्रेत्तर संशोधन करने हेतु निम्नलिखित नियम बनाते हैं, अर्थात् :—

उत्तराखण्ड माल और सेवा कर (नवां संशोधन) नियम, 2020

संक्षिप्त नाम एवं प्रारम्भ

- 1. (1) इन नियमों का संक्षिप्त नाम उत्तराखण्ड माल और सेवा कर (नवां संशोधन) नियम, 2020 है।
 - (2) ये दिनांक 30 जुलाई, 2020 से प्रवृत्त होंगे।

प्रारूप जीएसटी आईएनवी-01 का संशोधन . उत्तराखण्ड माल और सेवाकर नियम, 2017 में **प्रारूप जीएसटी आईएनवी-01** के स्थान पर निम्नलिखित प्रारूप रखा जाएगा, अर्थात् :-

"प्रारूप जीएसटी आईएनवी -01

(नियम 48 देखिये)

Format/Schema for e-Invoice

Note 1: Cardinality means whether reporting of the item(s) is mandatory or optional as explained below:

0..1: It means that reporting of item is optional and when reported, the same cannot be repeated.

1..1: It means that reporting of item is mandatory but cannot be repeated.

1..n. It means that reporting of item is mandatory and can be repeated more than once.

0...n: It means that reporting of item is optional but can be repeated more than once if reported. For example, previous invoice reference is optional but if required one can mention many previous invoice references.

Note 2: Field specification Number (Max length: m, n) indicates 'm' places before decimal point and 'n' places after decimal point. For example, Number (Max length: 3,3) will have the formut 999.999

		94.W.C		Schen	ia (Version I.I)	Maria dalektriki aya ada	
Sr No.	Fechnical nume of the field	Gaedi nality (01/ 11/ 0n/ (n)	Brief Description of the field	Whether Mandato ey/ Optional	Field Specification	Sample Value of the field	Explanatory Notes
1	2	3	4	5	6	7	8 .
1.	Basic Details	11	-	Mandato ry			Header for Basic Details
1.0	Version	l1	Version Number	Mandator y	String (Max. Length;6)	1.1	This is version of the e-invoice schema. It will be used to keep track of version of Invoice specification.
	IRN	11	Invoice Reference Number	Mandator y	String (Length:64)	a5c12dca80 e7433217 ba4013750 f2046f229	This will be a unique reference number for the invoice. However, the supplier will not be populating this field.
!						· 	The registration request may not have this field populated.

		T		· · · · · · · · · · · · · · · · · · ·			
1	2	3	4	5	6	7	8
		-				2	The Invoice Registration Portal (IRP) will generate this IRN and respond to the registration request. e-invoice is valid only when it
							has the IRN. Hence, this is marked as mandatory field.
1.2	Supply_Typ e_Code	11	Code for Supply Type	Mandator y	Enumerated List	B2B/B2C/S EZWP/SEZ WOP/EXP WP/EXPW OP/DEXP	This will be the code to identify type of supply. B2B: Business to Business B2C: Business to Consumer
			:			,	SEZWP: To SEZ with
							Payment SEZWOP: To SEZ without Payment
				; ;	,		EXPWP: Export with Payment
							EXPWOP: Export without Payment
		•					DEXP: Deemed Export
1.3	Document_T ype_Code	11	Code for Document	Mandator y .	Enumerated List	INV / CRN / DBN	Type of Document: INV for Invoice,
			Туре				CRN for Credit Note,
				·) 	DBN for Debit note.
1.4	Document_ Num	11	Document Number	Mandator y	String (Max Length: 16)	Sa/1/2019	This is as per relevant rule in CGST/SGST/UTGST Rules.
1.5	Document_ Date	l1 ·	DocumentDate	Mandator y	String (DD/MM/YYYY)	21/07/2019	The date on which the Invoice was issued. Format "DD/MM/YYYY"
1.6	Additional_ Currency_C ode	01	Additional Currency Code	Optional	Enumerated List	USD, EUR	The field is for reporting additional currency, if any, in which all invoice amounts can be given, along with INR.
-					·		One such additional currency may be used in the invoice, as per list published under ISO 4217 standard.
				,			List published and updated from time to time at https://www.icegate.gov.in/Webappl/CUR_ENQ
1.7	Reverse_Cha rge	01	Reverse Charge	Optional	String (Length:1)	Y	Whether the tax liability payable is under Reverse Charge.
1.8	IGST_Appli cability_desp ite_Supplier _and_Recipi ent_located_ in_same_ State/UT	01	IGST Applicability despite Supplier and Recipient located in same State/UT	Optional	String (Length: 1)	N	To report the scenarios where the supply is chargeable to IGST despite the fact that the Supplier and Recipient are, located within same State/UT

1	2	3	4	5	6	7	8
2.	Document_ Period	01		Optional			Header for Document Period
2.1	Document_P eriod_Start _Date	11	Document Period Start Date	Mandator y	String (DD/MM/YYYY)	21/07/2019	This is the start date of the document period (delivery/invoice period). (This field is mandatory only if
<u> </u>							this section is selected)
2.2	Document_P eriod_End_ Date	1.,1	Document Period End Date	Mandator y	String (DD/MM/YYYY)	21/07/2019	This is the end date of the document period (delivery/invoice period). (This field is mandatory only if
	,						this section is selected)
3 7.	Preceding Document & Contract Reference	0.i		Optional			Header for Preceding Documents Contract Reference
3.1	Precedings Document Reference	0.n		Optional			Sub-header for Preceding Document Reference
3.1.1	Preceding_D ocument_ Number	11	Preceding Document Number	Mandator y	String (Max length:16)	Sa/1/2019	This is the reference of original document/invoice to be provided optionally in the case of debit or credit notes.
•				,			Credit/Debit notes, agains invoices can also be referred here.
							(This field is mandatory only ij this section is selected)
3.1.2	Preceding_D ocument_ Date	11	Date of Preceding Document	Mandatory	String (DD/MM/YYYY)	21/07/20 19	Date of preceding document/invoice.
							(This field is mandatory only this section is selected)
3.1.3	Other_ Reference	01	Other Reference	Optional	String (Maxlength:20)	KOL01	This field is to provide any additional reference e.g. specific branch, their user ID, their employee ID, sales centre reference etc.
3.2	Receipt / Contract References	0 n		Optional			Sub-header for Receipt/ Contract References
3.2.1	Receipt_Advi ce_Reference	01	Receipt Advice Reference	Optional	String (Max length:20)	CREDIT30	This reference is kept for user to provide number of their receip advice to their customer, in lieu of advance.
3.2.2	Receipt_Advi ce_Date	01	Date of Receipt Advice	Optional	String (DD/MM/YYYY)	21/07/2019	Date of issue of receipt advice for advance.
3.2.3	Tender_or_L ot_Reference	01	Tender or Lot Reference	Optional	String (Max length:20)	TENDERJA N2020	This reference is kept for mentioning number or details of Lot or Tender, if supplies are made under such Lot or tender.
3.2.4	Contract_Ref erence	01	Contract Reference	Optional	String (Max length:20)	CONT23072 019	This reference is kept for mentioning contract number, is supplies are made under any specific Contract
3.2.5	External_Ref erence	01	External Reference	Optional	String (Maxlength:20)	EXT23222	An additional field for provision of any additional/external reference number for the supply.

1	2	3	4	. 5	6	7	8
3.2.6	Project_Refe rence	01	Project Reference	Optional	String (Max length:20)	PITCODE0	This reference is kept for mentioning project number, supplies are made under ar specific project
3.2.7	PO _Ref_Num	01	PO Reference Number	Optional	String (Max length:16)	Vendor PO	This is the reference number of Purchase Order
3.2.8	PO_Ref_Dat	01	PO Reference Date	Optional	String (DD/MM/YYYY)	21/07/2019	This is the date of Purchase Order.
4.	Supplier Information	11		Mandato ry			Header for Supplie Information
4.1	Supplier_Le gai_Name	11	Supplier Legal Name	Mandator y	String (Max. length:100)	XYZ Ltd.	Legal Name, as appearing in PAN of the Supplier
4.2	Supplier_Tra de_ Name	01	Trade Name of Supplier	Optional	String (Max length: 100)	ABC Traders	A name by which the Supplier is known, i.e. Business Name, other than legal name
4.3	Supplier_ GSTIN	11	GSTIN of Supplier	Mandator y	String (Length: 15)	29AADFV7 589C1ZX	GSTIN of the Supplier
4.4	Supplier_A ddress1	11	Supplier Address 1	Mandator y	String (Max length: 100)	# 1-23-120, Flat No. 3, Nalanda Apartments, MG Road, Vasanth Nagar	Address I of the Supplier (Building/Flat no., Road/Street, Locality etc.)
4.5	Supplier_A ddress2	01	Supplier Address 2	Optional	String (Max length: 100)	# 1-23-120, Flat No. 3, Nalanda Apartments, MG Road, Vasanth Nagar	Address 2 of the Supplier (Building/Flat no., Road/Street, Locality etc.), if any
4.6	Supplier_Pla ce	11	Supplier Place	Mandator y	String (Max length:50)	Bangalore	Location of the Supplier (City/Town/Village)
4.7	Supplier_Sta te_Code	11	Supplier State Code	Mandator y	Enumerated List	29	State Code of the Supplier as per GST System List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENQ
4.8	Supplier_Pin code	11	Supplier PIN Code	Mandator y	Number (Length: 6)	560087	PIN Code of the Supplier Locality
4.9	Supplier_P hone	01	Supplier Phone	Optional	String (Max length:12)	9999999999	Contact number of the Supplier
4.10	Supplier_Em ai!	01	Supplier e-mail	Optional	String (Max length:100)	supplier@a bc.com	e-mail ID of the Supplier,as per REGEX (Regular Expressions) pattern
5.	Recipient Information	11		Mandato ry			Header for Recipient Information
5. I	Recipient_L egal_Name	11	Recipient Legal Name	Mandator y	String (Max. length:100)	PQR Pvt. Ltd.	It will be legal name of recipient, as per PAN.

- Khii				11, 2020	इंग् (क्याराक १७, १७	-ra_ \111 \11 \1	र() भाग १–७
1	2	3	4	5	6	7	8
5.2	Recipient_Tr ade_Name	01	Recipient Trade Name	Optional	String (Max length:100)	Adarsha	It will be trade name of recipient, if available.
5.3	Recipient_G STIN	1.11	GSTIN of Recipient	Mandator	String (Length: 15)	29ABCCRI 832CIZX, URP	GSTIN of the Recipient, if available.
							URP: In case of exports or if supplies are made to unregistered persons
5,4	Place_Of_Su pply_State_ Code	11	Place of Supply (State Code)	Mandator y	Enumerated List	29, 96	Code/State Code of Place of Supply as per GST System.
		,					List published and updated from time to time at https://www.icegate.gov.in/We bappl/STATE_ENQ
, 5.5	Recipient_A ddress1	11	Recipient Address I	Mandator y	String (Max length:100)	# 1-23-120, Flat No. 3. Nalanda Apartments, MG Road, Vasanth	Address I of the Recipient (Building/Flat no., Road/Street, Locality etc.)
	Davidian A	0.1		0 1	0.11	Nagar	Add 2 is - cut
5.6	Recipient_A ddress2	01	Recipient Address 2	Optional	String (Max length: 100)	# 1-23-120, Flat No. 3, Nalanda Apartments, MG Road,	Address 2, if any, of the Recipient (Building/Flat no., Road/Street, Locality etc.), if any
			- 1 -			Vasanth Nagar	
5.7	Recipient_P lace	11	Recipient Place	Mandator Y	String (Max length: 100)	Mysore	Location of the Recipient (City/Town/Village)
5.8	Recipient_St ate_Code	11	Recipient State Code	Mandator y	Enumerated List	29	Code/State Code of the Recipient.
							List published and updated from time to time at https://www.icegate.gov.in/We bapp/STATE_ENQ
5.9	Recipient_ Pincode	01	Recipient PIN Code	Optional	Number (Length: 6)	560002	PIN code of the Recipient locality.
							In case of export, Pincode need not be mentioned.
5.10	Country_Co de_of_Expor	01	Country Code of Export	Optional	Enumerated List	AN	Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system.
			-		· · · · · · · · · · · · · · · · · · ·		List published and updated from time to time at https://www.icegate.gov.in/Webappl/COUNTRY_ENQ
5.11	Recipient_P hone	01	Recipient Phone	Optional	String (Maxlength:12)	0802223323	Contact number of the Recipient
5.12	Recipient_e mail_ID	01	Recipient e-mail ID	Optional	String (Max length:100)	billing@xyz .com	e-mail ID of the Recipient, as per REGEX (Regular Expressions) pattern

11 1 1	'						
1	2	3	4	5	6	7	8
6.	Payee Information			Optional			Header for Payec Information
6.1	Payce_Name	01	Payee Name	Optional	String (Maxlength: 10(4)	Ramesh K	Name of the person to whom payment is to be made
6.2	Payee_Bank _Account_N umber	01	Payee Bank Account Number	Optional	String (Max length: 18)	3868501747 262	Bank Account Number of Payee
6.3	Mode_of_Pa yment	01	Mode of Payment	Optional	String (Max length: 18)	Direct Transfer	Mode of Payment:Cash/Credit/Direct Transfer etc.
6.4	Bank _Branch_Co de	01	Bank Branch Code	Optional	String (Max length: 11)	SBIN98765 43	Indian Financial System Code (IFSC) of Payee's Bank Branch
6.5	Payment_Te rms	01	Payment Terms	Optional	String (Max length: 100)	Text	Terms of Payment, if any, with the Recipient can be provided.
6.6	Payment_Ins truction	10	Payment Instruction	Optional	String (Max length:100)	Text	Instruction, if any, regarding payment can be provided
6.7	Credit_Trans fer_Terms	01	Credit Transfer Terms	Optional	String (Max length: 100)	Text	Terms to specify credit transfer payments.
6.8	Direct_Debit _Terms	01	Direct Debit Terms	Optional	String (Ma x length:100)	Text	Terms, if any, to specify a direct debit.
6.9	Credit_Days	01	Credit Days	Optional	Numeric (Max length:4)	30	Number of days within which payment is due.
1	Delivery In formation	0.1		Optional			Header for Delivery Information
7.1	Ship_To_De tails	01	Ship To Details	Optional	Refer A 1.0		Details of location to which the supply has to be delivered.
7.2	Dispatch_Fr om_Details	01	Dispatch From Details	Optional	Refer A 1.1		Details of location from where Supply has to be dispatched.
8.	Invoice Item Details	1.00		Man datory			Hesder for Invoice frem Defails
8.1	Item_List	In	Item List	Mandato ry	Refer A 1.2		Provides information about the goods and services being invoiced.
9.	Document Total	11		Man datory			Header for Document Total Details
9.1	Document_ Total_Detail	11	Document Total Details	Mandator y	Refer A 1.3		Details of document total including taxes.
10.	S Extra Information	0.1		Option al			Header for Extra Information

1	2	3	4	5	6	7	8
1.01	Tax_Scheme	1,.1	Tax Scheme	Mandator y	String (Max length: 10)	GST	To specify the tax/levy applicable – GST (This field is mandatory only if this section is selected)
10.2	Remarks	01	Remarks	Optional	String (Max length: 100)	New batch Items submitted	A textual note that gives unstructured information that is relevant to the Invoice as a whole e.g. reasons for any correction or assignment note in case the invoice has been factored etc.
10.3	Port_Code	01	Port Code	Optional	Enumerated List	Alpha numeric	In case of export/supply to SEZ, port code can be mentioned as per Indian Customs EDI System (ICES), if applicable and available at the time of reporting e-invoice.
							Lists published and updated from time to time at below URLs:
							EDI Port Codes: https://www.icegate.gov.in/Webappl/LOCATION_ENQ
							Non-EDI Port Codes: https://www.icegate.gov.in/Webappl/nonlocation_det_all.isp
10.4	Shipping_Bi II_Number	01	Shipping Bill Number	Optional	String (Max length: 20)	Alpha numeric	In case of export/supply to SEZ, shipping bill number as per Indian Customs EDI System (ICES), can be mentioned, if applicable and available at the time of
10.5	Shipping_Bi	01	Shipping Bill Date	Optional	String(DD/M M/YYYY)	03/12/2020	reporting e-invoice. Date of Shipping Bill as per Indian Customs EDI System (ICES)
10.6	Export_Duty _Amount	01	Export Duty Amount	Optional	Number (Max Length: 12,2)	1200000.50	Amount of Export Duty in INR, if any, applicable (in case of invoices for export)
10.7	Supplier_Ca n_Opt_Refu nd	01	Supplier Can Opt Refund	Optional	String (Length: 1)	Y/N	In case of deemed export supplies, this field is for mentioning whether supplier can exercise the option of claiming refund or not.
10.8	ECOM_GST IN	01	e-Commerce Operator's GSTIN	Optional	String (Length: 15)	29ABCCR183 2CICX	GSTIN of e-commerce operator, if supply is made through him/her.
11.	Addifional Supporting Documents	0.n		Optional			Header for Additional Supporting Documents
11,]	Additional_ Supporting_ Documents_ URL	01	Additional Supporting Documents URL	Optional	String (Max length: 100)	http://www.xy z.com/abc	This is to enter URL reference of additional supporting documents, if any.
11.2	Additional_ Supporting _Documents _base64	01	AdditionalSupp orting Document in base64	Optional	String (Max length: 1000)	Base 64 encoded Document	This is to add any additional document in PDF/Microsoft Word in Base64 encoded format.

1	2	3	4	5	6	7	8
11.3	Additional_I nformation	01	Additional Information	Optional	String (Max length: 1000)	Freetext. remarks, identifiers, etc.	Any additional information. names, values, data etc. that is specific for the Supplier- Recipient transaction e.g. CIN. trade-specific information, Drug Licence Reg. No., FOB/CIF etc.
12.	E-way Bill Details	0,1		Optional			Header for e-way Bill Details
12.1	Transporter_I D	01	Transporter ID	Option al	String (Length: 15)	29AADFV758 9C1ZO	Registration / Enrolment Number of the transporter
							(This field is required if Part-A of E-waybill has to be generated)
12.2	Trans_Mode	01	Mode of Transportation	Optional	Enumerated List	1/2/3/4	Option to be provided based or mode of transport available on e-Way Bill Portal
			,				I for Road;
							2 for Rail; 3 for Air;
							4 for Ship
							(This field is required if Part-B of e-way bill is also to be generated)
12.3	Trans_Distan	1.,1	Distance of Transportation	Mandator y	Number (Max length: 4)	200	Distance of Transportation (This field is mandatory only if
	- -						this section is selected)
12.4	Transporter_ Name	01	Transporter Name	Optional	String (Max length: 100)	Sphurthi Transporters	Name of the Transporter
12.5	Trans_Doc_ No.	01	Transport Document	Optional	String (Max length: 15)	As/34/746	Transport Document Number
			Number		•		(This field is mandatory if mode of Transport is Rail or Air or Ship)
12.6	Trans_Doc_ Date	01	Transport Document Date	Optional	String(DD/MM/YY YY)	21/07/2019	Date of Transport document.
			***				(This field is mandatory if mode of Transport is Rail or Air or Ship)
12.7	Vehicle_No	01	Vehicle Number	Optional	String (Max. length: 20)	KA12KA1234 or	Vehicle Registration Number
						KA12K1234 or KA123456 or KAR1234	(This field is mandatory if mode of Transport is Road)
12.8	Vehicle_Typ	01	Vehicle Type	Optional	Enumeration List	O/R	To mention nature of vehicle:
							O: Over-Dimensional Cargo
The second secon			•				R: Regular (This field is mandatory if Part-B of e-way bill is also to be generated)
A 1.0	Ship To Details	01		Optional			be generated) Header for Annexyre A 1.0:Ship To Detalls

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Sr.	Parameter Name	Cardi nality	Description	Whether optional or	Field Specifications	Sample Value	Explanatory Notes
	1			mandato ry]]	
1	2	3	4	5	6	7	8
A.1.0.	ShipTo_Lega I_Name	11	Ship To Legal Name	Mandator y	String (Max length: 100)	ABC-1 Ltd.	Legal Name of the entity to whom the supplies are shipped to. (This field is mandatory only if
A.1.0. 2	ShipTo_Trad e_Name	01	Ship To Trade Name	Optional	String (Max length: 100)	XYZ-I	this section is selected) Trade Name of the entity to whom the supplies are shipped to.
A.1.0.	ShipTo_GST IN	01	Ship To GSTIN	Optional .	String (Length: 15)	36AABCT222 3L1ZF	GSTIN of the entity to whom the supplies are shipped to.
A.1.0. 4	ShipTo_Addr ess I	11	Ship To Address!	Mandator y	String (Max length: 100)	Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address i of the entity to whom the supplies are shipped to (This field is mandatory only if this section is selected)
A.1.0.	ShipTo_Addr ess2	01	Ship To Address2	Optional	String (Max length: 100)	Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address 2, if any, of the entity to whom the supplies are shipped to
A.1.0. 6	ShipTo_Plac e	11	Ship To Place	Mandator y	String (Max length: 100)	Bangalore	Place (City/Town/Village) of entity to whom the supplies are shipped to.
							(This field is mandatory only if this section is selected)
A.1.0. 7	ShipTo_Pinc ode	11	Ship To Pincode	Mandator y	Number(Max length: 6)	560001	PIN code of the location to which the supplies are shipped to.
							(This field is mandatory only if this section is selected)
A.1.0. 8	Ship_To_Stat e_Code	I1 _.	Ship To State Code	Mandator y	Enumerated List	29	Code/State Code (as per GST System) to which the supplies are shipped to.
		•					List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENQ
							(This field is mandatory only if this section is selected)
A 1.1	Dispatch From Details	01		Optional			Header for Annexure A 1-1-Dispatch From Details
Sr. No.	Parameter Name	Cardi nality	Description	Whether mandato ry or optional	Field Specific ations.	Sample Value	Explanatory Notes
A.1.1.	DispatchFro m_Name	11	Dispatch From Name	Mandator	String (Max length:100)	XYZ-2	Name of the entity from which goods are dispatched.
		<u>-</u>					(This field is mandatory only if this section is selected)

1	2	3	4	5	6	7	8
A.1.1	DispatchFrom_Address		Dispatch From Address1	Mandato y	r String (Max length: 100)	Building No. 4/2, Flat No. 3, Kakatiya Apartments, Vasanth Nagar	Address I of the entity from which goods are dispatched. (This field is mandatory only if this section is selected)
A.I.I	. DispatchFrom_Address3		Dispatch From Address2	Optional	String (Max length: 100)	Building No. 4/2. Flat No. 3, Kakatiya Apartments, Vasanth Nagar	Address 2 of the entity from which goods are dispatched.
A.1.1	DispatchFro m_Place	11	Dispatch From Place	Mandator y	String (Max length: 100)	Bangalore	Place (City/Town/Village) of the entity from which goods are dispatched. (This field is mandatory only if
A.1.1.	DispatchFro m_State_Co de	11	Dispatch From State Code	Mandator y	Enumerated List	29	this section is selected) Code/State Code of the entity (as per GST System), from which goods are dispatched. List published and updated from time to time at https://www.icegate.gov.in/Webappl/STATE_ENQ (This field is mandatory only if
A.1.I. 6	DispatchFro m_Pincode	1	Dispatch From Pincode	Mandator y	Number(Length: 6)	560087	this section is selected) Pincode of the locality of entity from where goods are dispatched. (This field is mandatory only if this section is selected)
A 1.2	Item Details	Lin		Mandato ry			Header für Angekure A I.2:Ifem Details
Sr. No.	Parameter Name	Cardi nality	Description	Whether mandato ry or optional	Field Specifications	Sample Value	Explanatory Notes
A.1.2.	SI_No.		Serial Number	Mandator y	String (Max length: 6)	1,2,3	Serial number of the item
A.1.2. 2	Item_Descri ption		Item Description	Optional	String (Max length: 300)	Mobile	Description of the item
A.1.2. 3	ls_Service	11	Service *	Mandator y	String (Length: 1)	Y/N	Specify whether supply is service or not.
A.1.2. 4	HSN_Code	11	HSN Code	Mandator y	String (Max length: 8)	1122	To enter applicable HSN / SAC Code of Goods / Service
A.1.2. 5	Batch Details	01		Optional	Refer A 1.4		Some manufacturers may mention batch details (in Section A 1.4)
A.1.2. 6	Barcode	01	Barçode	Optional	String (Max length: 30)		Barcode, if any, of the item.
A.1.2. 7	Quantity	01	Quantity	Optional	Number (Max length: 10,3)		The quantity of items to be mentioned in the invoice.
A.1.2.	Free_Qty	01 F	ree Quantity	Optional	Number (Max		This is mandatory only in case of goods. Quantity of item(s), if any,
8					length: 10,3)		given free of charge (FOC)

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1	2	3	4	5	6	7	8	
A.1.2. 9	Unit_Of_Me asurement	10	Unit of Measurement	Optional	String (Max length: 8)	Box	The Unit of Measuremen (UOM), if any, applicable or invoiced goods.	
A.1.2. J0	Item_Price	11	Item Price	Mandator y	Number (Max length: 12.3)	500.5	Price per unit item.	
A.1.2.	Gross_Amou nt	11	Gross Amount	Mandator y	Number (Max length : 12.2)	5000	The gross price of an item (cost multiplied by quantity rounded off to 2 decimal), exclusive of taxes.	
A.1.2. 12	ltem_Discou nt_Amount	01	Item Discount Amount	Optional	Number (Max length: 12,2)	10.25	Discount amount, if any, for the item.	
A.1.2. 13	Pre_Tax_Val ue	01	Pre-Tax Value	Optional .	Number (Max length: 12,2)	99.00	If pre-tax value is different from taxable value, mention the pre-tax value and taxable values separately.	
							in some cases, the pre-tax value may be different from taxable value.	
							For example, where old goods are exchanged for new ones (e.g. new phone supplied for INR 20,000 along with exchange of old phone, there pre-tax value would be INR 20,000 and taxable value would be INR 24,000, assuming exchange value of old phone is 4,000.	
							Another example is in the case of real estate where pre-tar value may be different from taxable value.	
A.1.2. 14	Item_Taxabl e_Value	11	Item Taxable Value	Mandator y	Number (Max length: 12,2)	5000	This is the value on which tax is computed. Value cannot be negative.	
A.1.2.	GST_Rate	11	GST Rate	Mandator y	Number (Max length: 3,3)	5	The GST rate, represented as percentage that applies to the invoiced item. It will be IGST rate or sum of CGST & SGST Rates.	
A.1.2. 16	IGST_Amt	01	IGST Amount	Optional	Number (Max Length: 12,2)	999.45	Amount of IGST payable per item(rounded off to 2 decimals). If IGST is reported, then CGST & SGST/UTGST will be blank. For taxable supplies, either IGST or CGST & SGST/UTGST should be reported.	
A.1.2. 17	CGST_Amt	01	CGST Amount	Optional	Number (Max Length: 12.2)	650.00	Amount of CGST payable per item(rounded off to 2 decimals). If CGST is reported, then SGST/UTGST has to be reported and iGST will be blank.	
A:1.2. 18	SGST_UTG ST Amt	01	SGST/UTGST Amount	Optional	Number (Max length: 12,2)	650.00	Amount of SGST/UTGST payable per item(rounded off to 2 decimals).	

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1	2	3	4	5	6	7	8
							If SGST/UTGST is reported, then CGST must be reported and IGST will be blank.
A1.2.	Comp_Cess_ Rate_Ad_val orem	01	Compensation Cess Rate, Ad_Valorem	Optional	Number (Max length:3,3)	2.5%	Ad valoremRate of GST Compensation Cess, applicable, if any
A1.2. 20	Comp_Cess_ Amt_ Ad_Valorem	01	Compensation Cess Amount, Ad Valorem	Optional	Number (Max length: 12,2)	56.00	GST Compensation Cess amount, ad valorem (rounded off to 2 decimals) (based on value of the item)
A1.2. 21	Comp_Cess_ Amt_Non_A d_Valorem	01	Compensation Cess Amount, Non ad valorem	Optional	Number (Max length:12,2)	23.00	GST Compensation Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.)
A1.2. 22	State_Cess_ Rate_ad_val orem	10	State Cess Rate, Ad Valorem	Optional .	Number (Max length: 3,3)	1.5 %	Ad valorem Rate of State/UT Cess, applicable, if any
A1.2. 23	State_Cess_ Amt_Ad_Va lorem	01	State Cess Amount, ad valorem	Optional	Number (Max length: 12,2)	43.00	State/UT Cess amount, ad valorem (based on value of the item)
A1.2. 24	State_Cess_ Amt_Non_A d_Valorem	0t	State Cess Amount, nonad valorem	Optional	Number (Max length: 12,2)	12.00	State/UT Cess amount, computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.)
A.1.2. 25	Other_Charg es_Item_Lev el	01	Other Charges (item level)	Optional	Number (Max length: 12,2)	874.95	Any other charges applicable at item level.
			,	·			These may not be part of taxable value, e.g. in case of pure agent reimbursement.
A.1.2. 26	Purchase_Or der_Line_Re ference	01	Purchase Order Line Reference	Optional	String (Max length: 50)	746/ABC/01	Reference of Purchase Order Line
A.1.2. 27	Item_Total_ Amt	I. ,1	Item Total Amount	Mandator y	Number (Max length: 12,2)	5000	The item total value that includes all taxes, cesses, as well as other charges.
							However, this value excludes discount if any.
A.1.2.	Origin_Coun try_Code	01	Code of Country of Origin	Optional	Enumerated List	DZ	This is to specify country of origin of the item, e.g. mobile phone sold in India could be manufactured in other country;
							Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system (ICES).
			,		,		List published and updated from time to time at https://www.icegate.gov.in/Webappl/COUNTRY_ENO
A.1.2. 29	Unique_Seri al_Number	01	Unique Serial Number	Optional	String (Max length: 20)		Serial number, in case of each item having a unique number.
A.1.2. 30	Product_Att ribute_Detai ls	0n	Optional	R	Refer A.1.5		Attribute details of product

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1	2	3	4	5	6	7	8
A 1.3	Document Total Details	11		Manda tory			Header for Annexure A 1.3: Document Total Details
Sr: No.	Parameter Name	Cardi nality	Description	Whethe r mandat ory or optiona		Sample Value	Explanatory Notes
A.1.3.	Taxable_Value_Total	1.,1	Total Taxable Value	Mandat ory	Number (Max length: 14,2)	768439.35	This is the sum of the taxable values of all the items in the document.
A.1.3. 2	IGST_Amt_ Total	01	Total IGST Amount	Optiona I	Number (Max length : 14,2)	265.50	Total IGST amount for the invoice. Appropriate taxes based on rule will be applicable.
							For example, either of CGST & SGST/UTGST or IGST will be mandatory.
			,				As this is conditional mandatory, it is marked as 'optional'
A.1.3. 3	CGST_Am_ Total	01	Total CGST Amount	Option al	Number (Max length: 14,2)	65.45	Total CGST amount for the invoice.
•	est of a						Appropriate taxes based on rule will be applicable.
							For example, either of CGST & SGST/UTGST or IGST will be mandatory.
							As this is conditional mandatory, it is marked as 'optional'
A.1.3. 4	SGST_UTG ST_Amt_To tal	01	Total SGST/UTGST Amount	Option al	Number (Max length: 14,2)	65.45	Total SGST/UTGST amount for the invoice.
		-	·				Appropriate taxes based on rule will be applicable. For example, either of CGST & SGST/UTGST or IGST will be mandatory.
						· .	As it is conditional mandatory. it is marked as 'optional'
A.1.3. 5	Comp_Cess _Amt_Total	01	Total Compensation Cess Amount-	Option al	Number (Max length : 14,2)	24.95	Total GST Compensation Cess amount for the invoice (ad valorem as well as non-ad valorem)
A.1.3. 6	State_Cess_ Amt_Total	01	Total State Cess Amount	Option al	Number (Max length: 14,2)	5.45	Total State cess amount for the invoice (ad valorem as well as non-ad valorem)
A.1.3.7	Discount_A mt_Invoice_ Level	01	Invoice Level Discount Amount	Option al	Number (Max length: 14,2)	100.00	This is Discount Amount, if any, applicable on total invoice value
A.1.3.8	Other_Charg es_Invoice_ Level	0.,1	Other Charges (Invoice Level)	Option al	Number(Max length: 14,2)	200.00	This is Other charges, if any, applicable on total invoice value

1	2	3	4	5	6	7	8
A.1.3,9	Round_Off_ Amount	01	Round Off Amount	Option al	Number (Max length: 2.2)	31.21	This is round off amount of total invoice value
A.1.3 .10	Total_Invoic e_Value_IN R	11	Total Invoice Value in INR	Mandat ory	Number (Max length: 14,2)	745249678.50	The total value of invoice including taxes/GST and rounded to two decimals maximum.
A.1.3 .11	Total_Invoic e_Value_FC NR	01	Total Invoice Value in FCNR	Option al	Number (Max length: 14,2)	\$5729.65	The total value of invoice in Additional Currency
A.1.3. 12	Paid_Amoun t	·01	Paid Amount	Optiona I	Number (Max length: 14,2)	8463.50	The amount, if any, which has been paid in advance. It must be rounded to maximum
				<u> </u>			2 decimals.
A.1.3. 13	Amount_Du e_	01	Amount Due	Optiona I	Number (Max length:14.2)	98789.50	The outstanding amount due for payment. It must be rounded to maximum 2 decimals.
A 1.4	Batch Details	0.1		Option al			Header for Annexure A 1.4;Batch Details
St. Zo	Parameter Name	Cardi nality	Description	Wheth er manda tory or	Field Specific ations	Sample Value	Explanatory Notes
eri eri				option			
A.1.4.	Batch_Num ber	11	Batch Number	Mandat Ory	String (Max Length: 20)	673927	Certain set of manufacturers may mention batch number details. (This field is mandatory only if this section is selected)
A.1.4. 2	Batch_Expir j_ Date	01	Batch Expiry Date	Option al	String (DD/MM/YYYY)	21/11/2019	Expiry Date of the Batch, if any
A.1.4. 3	Warranty_D ate	01	Warranty Date	Option al	String (DD/MM/YYYY)	21/11/2019	Warranty date for the Item, if any.
A15	Attribute Details of Item	0n		Option al			Header for Annexure A L'S'Aftribute Details of Item
Sr. No	Parameter Name	Cardi nality	Deşcriptiğn	Wheth er manda tory or	Pield Specific ations	Sample Value	Explanatory notes
				option al			
A.1.5.	Attribute_N ame	01	Attribute Name	Option al	String (Max Length: 100)	Colour	Attribute Name of the item.
A.1.5. 2	Attribute_V alue	01	Attribute Value	Option al	String (Max Length: 100)	Red, green, etc.	Attribute Value of item.".
	·						

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 688/2020/6(120)/XXVII(8)/2020/CT-60, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No.688/2020/6(120)/XXVII(8)/2020/CT-60--In exercise of the powers conferred by Section 164 of the Uttarakhand Goods and Services Tax Act, 2017 (Act No. 06 of 2017), the Governor, on the recommendation of Council, is pleased to make the following rules to further amend the Uttarakhand Goods and Services Tax Rules, 2017, namely:--

The Uttarakhand Goods and Services Tax (Ninth Amendment) Rules, 2020

Short Title and Commencement

- (1) These rules may be called the Uttarakhand Goods and Services Tax (Ninth Amendment) Rules, 2020.
 - (2) They shall come into force from 30th July, 2020.

Amendment in FORM GST INV-01

2. In the Uttarakhand Goods and Services Tax Rules, 2017, for FORM GST INV-01, the following form shall be substituted, namely:-

"FORM GST INV-1

(See Rule 48)

Format/Schema for e-Invoice

Note 1: Cardinality means whether reporting of the item(s) is mandatory or optional as explained below:

0. It it means that reporting of item is optional and when reported, the same cannot be repeated.

1..1; It means that reporting of item is mandatory but cannot be repeated.

1..n: It means that reporting of item is mandatory and can be repeated more than once.

0..n: It means that reporting of item is optional but can be repeated more than once if reported. For example, previous involce reference is optional but if required one can mention many previous involce references.

Note 2: Field specification Number (Max length: m, n) indicates 'm' places before decimal point and 'n' places after decimal point. For example, Number (Max length: 3.3) will have the format 999.999

-							used to keep track of version of Invoice specification.
1.0	Version	11	Version Number	Mandatory	String (Max. Length:6)	1.1	This is version of the e- invoice schema. It will be
1	Basic Details	1.1		Mandatory			Header för Basic Details
1	2	3	4	5.	6	7	8
	e (Vacinius) en in Sulis		etrory Oue omprovisie Sessie freid Se	e da jana Endontrano Stolatorina		100 mg (100 mg) 100 mg (100 mg)	Explanation Notes

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1	2	3	4	5	6	7	8
1.1	IRN	11	Invoice Reference Number	Mandatory	String (Length: 64)	a5c12dca80 e7433217 ba4013750	This will be a unique reference number for the invoice.
-		-	<u> </u>			f2046f229	However, the supplier will not be populating this field.
							The registration request may not have this field populated.
		·					The Invoice Registration
							Portal (IRP) will generate this IRN and respond to the registration request.
		•					e-invoice is valid only when it has the IRN: Hence, this is
1.2	Supply_Typ	1,1	Code for	Mandatory	Enumerated List	B2B/B2C/\$	marked as mandatory field. This will be the code to
	e_Code		Supply Type		•	EZWP/SEZ WOP/EXP	identify type of supply.
, . 						WP/EXPW OP/DEXP	B2B: Business to Business
ı						<u> </u>	B2C: Business to Consumer
į							SEZWR: To SEZ with Payment SEZWOP: To SEZ without
			•) **. 		Payment
							EXPWP: Export with Payment
			(4) · 可是能源的	8 - 5 7/4			EXPWOP: Export without Payment
	-			1 V *1.3			DEXP: Deemed Export
1.3	Document_T ype_Code		Code for Document Type	Mandatory	Enumerated bist	ADBN .	Type of Document:
							CRN for Credit Note,
	andreal ear						DBN for Debit note.
1.4	Document_ Num		Dacument Number		String (Max Length:16)	Sa/1/20.19	This is as per relevant rule in CGST/SGST/UTGST Rules.
	Document_ Date	11	Document Date	Mändatöry	String (DD/MM/YYYY)	21/07/2019	The date on which the Involve was issued Format
							TEMMYYXY'
	Additional Currency C		Addiķīājial Currency Cade	Optional .	Enumeratéd List		The Neid is for reporting additional correlator. If any, in
*	ode						Which all invoice amounts can be given, along with INR:
							One such additional currency may be used in the invoice, as per list published under ISO 4317 standard.
						1 <u>1</u>	List published and updated from time to time af https://www.icegate.gov.in/
						1	Webappi/CUR_ENQ

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1	2	3	4	5	6	7	8
1.7	Reverse_Cha rge	01	Reverse Charge	Optional	String (Length:1)	Y	Whether the tax liability payable is under Reverse Charge.
1.8	IGST_Appli cability_desp ite_Supplier _and_Recipi ent_located_ in_same_ State/UT	01	IGST Applicability despite Supplier and Recipient located in same State/UT	Optional	String (Length: 1)	7/	To report the scenarios where the supply is chargeable to IGST despite the fact that the Supplier and Recipient are located within same State/UT
2.	Document Period = 100	0.1		Optional			Header for Document Period
2.1	Document_P eriod_Start _Date	11	Document Period Start Date	Mandatory	String (DD/MM/YYYY)	21/07/2019	This is the start date of the document period (delivery/invoice period).
					`		(This field is mandatory only if this section is selected)
2.2	Document_P eriod_End_ Date	ì.,1	Document Period End Date	Mandatory	String (DD/MM/YYYY)	21/07/2019	This is the end date of the document period (delivery/invoice period).
							(This field is mandatory only if this section is selected)
	Procedine Documents Contract Reference			Optional -			He districtly coding the ment consists Repaire Sec.
	Prisection (*) Document (*) Reference						, Orchensyne recenne. Dodger etelerate
-	Preceding D ocument_ Number	ii	Preceding Document Number	Mandatory	String (Max length:16)	Sa/1/2019	This is the reference of original document/invoice to be provided optionally in the case of debit or credit notes.
							Efedit/Debit notes, against invoices can also be referred here.
			·				(This field is mandatory only if this section is selected)
	Preceding_D ocument_Date	1.,1	Date of Preceding Document	Mandatory	String (DD/MM/YYYY)	21/07/20 19	Date of preceding document/invoice. (This field is mandatory only
	Other_ Reference	01	Other Reference	Optional	String (Max length:20)		if this section is selected) This field is to provide any additional reference e.g. specific branch, their user ID, their employee ID, sales centre reference etc.
	Receipt / Contract References	0.h		Optional		(1) 20 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Sub-heilder for Récept./ Contract References
3.2.1	Receipt_Advi ce_Reference	01	Receipt Advice Reference	Optional	String (Max length:20)		This reference is kept for user to provide number of their receipt advice to their customer, in lieu of advance.
	Receipt_Advi ce _Date		Date of Receipt Advice	Optional	String (DD/MM/YYYY)		Date of issue of receipt advice for advance.

41.1	1—40 _]	9	त्रासखण्ड गण	C, U/ 79+6	18, 2020 5 0 (कातव	P 16, 1942	शक सम्वत्) 46:
1	2	3	4	5	6	7	8
3.2.3	ot_Reference		Tender or Lot Reference	Optional	String (Max length:20	N2020	mentioning number or details of Lot or Tender, if supplies are made under such Lot of tender.
3.2.4	Contract_Ref erence	01	Contract Reference	Optional	String (Max length:20) CONT2307 019	2 This reference is kept for mentioning contract number, if supplies are made under any specific Contract
3.2.5	External_Ref erence:	01	External Reference	Optional	String (Max length:20	EXT23222	An additional field for provision of any additional/external reference number for the supply.
3.2.6	Project_Refe rence	01	Project Reference	Optional	String (Max length:20)	PJTCODE0 1	
3.2.7	PO _Ref_Num	01	PO Reference Number	Optional	String (Max length: 16)	Vendor PO /1	This is the reference number of Purchase Order
3.2.8	C. Land	0.1	PO Reference Date	Optional	String (DD/MM/YYYY)	21/07/2019	This is the date of Purchase Order.
	Tippite **			Visidatory			Houge is Eight Asopolis life in allow the so
4: I	A DESCRIPTION OF THE PROPERTY		Supplier Legal Name	Mandatory	String (Max. length: 100)	XYZ Ltd.	Legal Name, as appearing in PAN of the Supplier
4.2	Supplier_Trade_Name		Trade Name of Supplier	Optional	String (Max length: 100)	ABC Traders	A name by which the Supplier is known, i.e. Business Name, other than legal name
4.3	GSTIN		GSTIN of Supplier	Mandatory	String (Length: 15)	29AADFY7 589C1ZX	GSTIN of the Supplier
4.4	Supplier A delects		Sapplier Addæss I	Mandatory	String (Max Tength: 100)	# [-23-]20, Fiai No. 3, Nalanda Apariments, MG Road, Vasanth Nagar	Address I of the Supplier (Building/Flat no.; Road/Street; Locality etc.)
4.5	Supplier A didress2		Supplier Address 2	Optional	String (Max length: 100)	# 1-23-120; Flat No. 3, Nalanda Apartments, MG Read, Vasanth, Nagar	Address 2 of the Supplier (Building/Flat no., Road/Street, Locality etc.), if any
4.6	Suppliër_Pla i ce	1 S	iupplier Place	Mandatory	String (Max length:50)	Bangalore	Location of the Supplier (City/Fown/Village)
4.7	Supplier_Sta 1 te_Code		upplier State ode	Mandatory	Enumerated List	29	State Code of the Supplier as per GST System List published and updated from time to time at https://www.icegate.gov.in/Webappi/STATE_ENO
4.8	Supplier_Pin 1		upplier PIN ode	Mandatory	Number (Length; 6)		PIN Code of the Supplier Locality
4.9	Supplier_P 0	.,1 S	upplier Phone	Optional	String (Max length:12)		Contact number of the Supplier
	Supplier_Em 0. aif	. i S	upplier e-mail	Optional	String (Max length:100)	bc.com	e-mail ID of the Supplier, as per REGEX (Regular Expressions) pattern
						7 1 4 4 4 4 7 7 7 7 7 P	grange pakarang malakan marahan bilan 1991 bilan Filipina

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5.	Recipient Information	11		Mandatory			Header for Recipient Information
			177				
5.1	Recipient_L egal_Name	11	Recipient Legal Name	Mandatory	String (Max. length: 100)	PQR Pvt. Ltd.	It will be legal name of recipient, as per PAN.
5.2	Recipient_Tr ade_Name	01	Recipient Trade Name	Optional	String (Max length: 100)	Adarsha	It will be trade name of recipient, if available.
5.3	Recipient_G STIN	1.,1	GSTIN of Recipient	Mandatory	String (Length:15)	29ABCCR1 832C1ZX, URP	GSTIN of the Recipient, if available.
			·	,			URP: In case of exports or if supplies are made to unregistered persons
5.4	Place_Of_Su pply_State_ Code	I1 ·	Place of Supply (State Code)	Mandatory	Enumerated List	29, 96	Code/State Code of Place of Supply as per GST System. List published and updated
						-	from time to time at https://www.icegate.gov.in/ Webappl/STATE_ENQ
5.5	Recipient_A ddress1	11	Recipient Address I	Mandatory	String (Max length:100)	# 1-23-120, Flat No. 3, Nalanda	Address 1 of the Recipient (Building/Flat no., Road/Street, Locality etc.)
						Apartments, MO Road, Vasanth Nagar	
5.6	Recipient_A ddress2	10	Recipient Address 2	Optional	String (Max length: 100)	# 1-23-120, Flat No. 3, Nalanda Apartments, MC Road,	Address 2, if any, of the Recipient (Building/Flat no., Road/Street, Locality etc.), if any
			. [Vasanth Nagar	
5.7	Recipient_P lace	11	Recipient Place	Mandatory	String (Max length:100)	Mysore	Location of the Recipient (City/Town/Village)
5.8	Recipient_St ate_Code		Recipient State Code	Mandatory	Enumerated List	29	Code/State Code of the Recipient.
		-					List published and updated from time to time at https://www.icegate.gov.in/Webappi/STATE_ENO
5.9	Recipient_ Pincode		Recipient PIN Code	Optional	Number (Length: 6)	560002	PIN code of the Recipient locality.
				Ostland	Paris and I sa	ANI	In case of export, Pincode need not be mentioned.
5.10	Country_Co de_of_Expor t		Country Code of Export	Optional	Enumerated List	AN	Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system.
							List published and updated from time to time at https://www.icegate.gov.in/Webappl/COUNTRY_ENQ
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5.11	Recipient_P hone	0.1	Recipient Phone	Optional	String (Max length:12)	0802223323	Contact number of the Recipient
5.12	Recipient_e mail_ID	01	Recipient e-mail	Optional	String (Max length: 100)	billing@xyz .com	e-mail ID of the Recipient, as per REGEX (Regular Expressions) pattern
6	Payee Information	0.1		Optional :			Header for Payer Information
6.1	Payee_Name	01	Payee Name	Optional	String (Max length: 100)	Ramesh K	Name of the person to whom payment is to be made
6.2	Payee_Bank _A ccount_Num ber	01	Payee Bank Account Number	Optional	String (Max length:18)	3868501747 262	Bank Account Number of Payee
6.3	Mode of Pa yment	01	Mode of Payment	Optional	String (Max length:18)	Direct Transfer	Mode of Payment: Cash/Credit/Direct Transfer etc.
6.4	Bank _Branch_Co de	01	Bank Branch Code	Optional	String (Max length: IT)	SBIN98765 43	Indian Financial System Code (IFSC) of Payee's Bank Branch
6.5	Payment_Te	01	Payment Terms	Optional	String (Max length:100)	Text	Terms of Payment, if shy, with the Resipient can be provided.
6.6	Payment_Instruction	01	Payment Instruction	Optional	String (Max length: 100)	Text	Instruction, if any, regarding payment can be provided
6.7	Credit Trans fer Terms		Credit Transfer Terms	Optional	String (Max length (100)	Text	Terms to specify credit transfer payments
6.8	Direct. Debit Terms	01	Direct Debit Terms	Optional	String (Ma x length:160)	Text	Terms, if any, to specify a direct debit.
5.9	Credit_Days	0.1	Credit Days	Optional	Numeric (Max length 4)	el Literación de la companya de la comp	Number of days within which payment is due.
							ng tang sang sandhyang ng paganagan ng paganagan
7.7	Ship To De tails	01	Ship To Details	Optional	Refer: A.J. O		Details of location to which the supply has to be delivered.
	Dispatch_Fr om_Details		Dispåtch From Details	Optional	Refer A.J.I		Details of location from where Supply has to be dispatched
	propies gent Daning Per Daning Per						
8.7	Item_List	1n	Item List	Mandatory	. <u>Refer. A 1:2</u>		Provides Informátion about the goods and services being invoiced:

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9.	Occument Total	11		Man datury			Hearler for Document	
		» !					Total Details	
9.1	Document_ Total_Detail s_	1.,1	Document Total Details	Mandatory	Refer /	4 1.3	Details of document total including taxes.	
10.	Extra Information	01		Option al			Header for Extra Information	
10.1	Tax_Scheme	11	Tax Scheme	Mandatory	String (Max length: 10)	GST	To specify the tax/levy applicable – GST (This field is mandatory only if this section is selected)	
10.2	Remarks	0 j	Remarks	Optional	String (Max length: 100)	New batch Items submitted	A textual note that gives unstructured information that is relevant to the Invoice as a whole e.g. reasons for	
,		-					any correction or assignment note in case the invoice has been factored etc.	
10.3	Port_Code	01	Port Code	Optional	Enumerated List	Alpha numeric	In case of export/supply to SEZ, port code can be mentioned as per Indian Customs EDI System	
							(ICES), if applicable and available at the time of reporting e-invoice.	
							Lists published and updated from time to time at below URLs:	
							EDI Port Codes: https://www.icegate.gov.in/ Webappl/LOCATION_EN Q	
				•			Non-EDI Port Codes: https://www.icegate.gov.in/ Webappl/nonlocation_det_a II.isp	
10.4	Shipping Bi II_Number	01	Shipping Bill Number	Optional	String (Max length: 20)	Alpha numeric	In case of export/supply to SEE, shipping bill number as per Indian Customs EDI System (ICES), can be mentioned, if applicable and available at the time of reporting e-invoice.	
10.5	Shipping_Bi II_Date	01	Shipping Bil! Date	Optional	String(DD/M M/YYYY)	03/12/2020	Date of Shipping Bill as per Indian Customs EDI System (ICES)	
10.6	Export_Duty _Amount	01	Export Duty Amount	Optional	Number (Max Length: 12,2)	1200000.50	Amount of Export Duty in INR, if any, applicable (in case of invoices for export)	
10.7	Supplier_Ca n_Opt_Refu nd	01	Supplier Can Opt Refund	Optional	String (Length: 1)	Y/N	In case of deemed export supplies, this field is for mentioning whether supplier can exercise the option of claiming refund or not.	
10.8	ECOM_GST IN	Ö I.	e-Commerce Operator's GSTIN	Optional	String (Length: 15)	29ABCCR183 2C1CX	GSTIN of e-commerce operator, if supply is made through him/her.	

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11.	Supporting.			Optional			Header for Addictional Supporting Documents
11.1		01	Additional Supporting Documents URL	Optional	String (Max length: 100)	http://www.xy z.com/abc	This is to enter URL reference of additional supporting documents, if any:
. 11.2	Additional_ Supporting _Documents _base64	01	AdditionalSupp orting Document in base64	Optional	String (Max length: 1000)	Base 64 encoded Document	This is to add any additional document in PDF/Microsoft Word in Base64 encoded format.
11.3	Additional_I nformation	01	Additional Information	Optional	String (Max length: 1000)	Free text, remarks, identifiers, etc.	Any additional information, names, values, data etc. that is specific for the Supplier-Recipient transaction e.g. CIN, trade-specific information, Drug Licence
	P-way Bill Defils			Qirigira)			Reg. No., FOB/GIF etc. Beaderstates (ABII)
12.1	Transporter_I	01	Transporter ID	Option al	String (Length: 15)	29AADFV758 9CIZO	Registration / Enrolment Number of the transporter
				,			(This field is required if Part-A of E-waybill has to be generated)
12.2	Trans_Mode		Mode of Transportation	Optional	Enumerated List	1/2/3/4	Option to be provided based on mode of transport available on e-Way Bill Portal
							1 for Road; 2 for Rail;
							3 for Air; 4 for Ship
7.5				75,7			(This field is required if Pari-B of e-way bill is also to be generated)
12.3	Trans_Distan ce		Distance of Fransportation	Mandatory	Number (Max length: 4)	200	Distance of Transportation (This field is mondatory only if this section is selected)
12.4	Transporter_ Name		Fransporter Name	Optional			Name of the Transporter .
12.5	Trans Doc_ No.	I	Fransport Document Number		String (Max length:		Transport Document Number (This field is mandatory if
							mode of Transport is Rail or Air or Ship)
12.6	Trans_Doc_ Date		Transport Document Date		String DD/MM/YYYY)	-	Date of Transport document. (This field is mandatory if
		_					mode of Transport is Rail or Air or Ship)

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12.7	Vehicle_No.	0. 1	Vehicle Number	Optional	String (Max. length: 20)	KA12KA1234 or KA12K1234	Vehicle Registration Number
						or KA123456 or KAR1234	(This field is mandatory if mode of Transport is Road)
12.8	Vehicle_Typ e	01	Vehicle Type	Optional	Enumeration List	O/R	To mention nature of vehicle:
							O: Over-Dimensional Cargo
							R: Regular
			necha ename o se ago e				(This field is mandatory if Part-B of e-way bill is also to be generated)
A 1.0	Ship To Details 170	-0.1 -0.1		2 Optional			Header toe Annexure A 11. I O Ship To Details
Si. Note	Parameter Name	Cards nality	Description E est see	Whether optional or mandatory	医多克里氏 医多克氏	Sample Value	ser Explanatory Motes
	1301			Liferia (SEC.			
A,1.0.	ShipTo_Lega I_Name	11	Ship To Legal Name	Mandatory.	String (Max length: 100)	ABC-1 Ltd.	Legal Name of the entity to whom the supplies are shipped to.
			· · · .				(This field is mandatory only if this section is selected)
A.1.0. 2	ShipTo_Trad - e_Name	01	Ship To Trade Name	Optional	String (Max length: 100)	XYZ-I	Trade Name of the entity to whom the supplies are shipped to.
A.1.0.	ShipTo_GST IN	01	Ship To GSTIN	Optional	String (Length: 15)	36AABCT222 3LIZF	GSTIN of the entity to whom the supplies are shipped to.
A.1.0.	ShipTo_Addr ess1		Ship To Address I	Mandatory	String (Max length: 100)	Fiat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address 1 of the entity to whom the supplies are shipped to (This field is mandatory only if this section is selected)
A.1.0.	ShipTo_Addr ess2		Ship To Address2	Optional	String (Max length: 100)	Flat No. 2, Priya Towers, Omega Road, Srinivasa Nagar	Address 2, if any, of the entity to whom the supplies are shipped to
A.1.0. 6	ShipTo_Plac e	11	Ship To Place	Mandatory	String (Max length: 100)	Bangalore	Place (City/Town/Village) of entity to whom the supplies are shipped to.
							(This field is mandatory only if this section is selected)
A.1.0. 7	ShipTo_Pinc ode		Ship To Pincode	Mandatory	Number (Max length: 6)	560001	PIN code of the location to which the supplies are shipped to.
							(This field is mandatory only if this section is selected)
A.I.0. 8	Ship_To_Stat e_Code		Ship To State Code	Mandatory	Enumerated List	29	Code/State Code (as per GST System) to which the supplies are shipped to.
							ist published and updated from time to time at https://www.icegate.gov.in/
		-					Webappi/STATE_ENQ

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							(This field is mandatory only if this section is selected)
A	Dispatch From- Details	0.1		Optional			Header for Annexure A L1: Dispatch From Details
Si- No.	Parameter Name	Cardi nality	Description	Whether mandator, voc	Field Specific ations	Sample Value	Explanatory Notes
A.1.1.	DispatchFro	11	Dispatch From	optional Mandatory	String	XYZ-2	Name of the entity from which goods are dispatched.
1	m_Name		Name		(Max length: 100)		(This field is mandatory only if this section is seletied).
A.1.1. 2	DispatchFrom Address I	F.,I	Dispatch From Address I	Mandatóry	String (Max length: 100)	Building No. 4/2, Flat No. 3, Kakatiya	Address 1 of the entity from which goods are dispatched.
,						Apartments, Vasanth Nagar	(This field is mandatory only if this section is selected)
A.1.1. 3	DispatchFro m_Address2	01	Dispatch From Address2	Optional	String (Max length: 100)	Building No. 4/2, Flat No. 3, Kakatiya Apartments,	Address 2 of the entity from which goods are dispatched.
A.1.1. 4	DispatchFro m_Place	1.a	Dispatch From Place	Mandatory	String (Max length: 100)	Väsanth Nagar Bangalore	Place (City/Town/Village) of the entity from which goods are dispatched.
							(This field is mandatory only if this section is selected)
A.1.1. 5	m_State_Co de	T1	Dispatch From State Code	Mandatory	Enumerated List	29	Code/State Code of the entity (as per GST System), from which goods are dispatched.
							List published and updated from time to time at https://www.icegate.gov.in/
						***	(This field is mandatory only if this section is selected)
`A.1.T. 6	DispatchFro m_Pincode	11	Dispatch Rrom Pincode	Mandatory	Number (Length: 6)	560087	Pincode of the locality of entity from where goods are dispatched.
- Lucian							(This field is mandatory only if this section is selected)
							Hengo par Apacoules (4) 2.77 Hengolet par (4) 3.7 planta - Na
			O contraction		and Survive and		
A. f. 2. 1	SI_No.	11	Serial Number	Mandatory	String (Max length: 6)	1,2,3	Serial number of the item
A.1.2. 2	Item_Description	01	Item Description	Optional	String (Max length: 300)	Mobile	Description of the item
A.1.2.	ls_Service	1:.1	Service	Mandalory	String (Length: 1)	ΥŃ	Specify whether supply is service or not.

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A.1.2.		11	HSN Code	Mandatory	String (Max length: 8)	1122	To enter applicable HSN / SAC Code of Goods / Service
A.1.2.	Batch Details	01		Optional	Refer A 1.4		Some manufacturers may mention batch details (in Section A 1.4)
A.1.2.	Barcode .	01	Barcode	Optional	String (Max length: 30)	b123	Barcode, if any, of the item.
A.1.2.	Quantity	01	Quantity	Optional	Number (Max length: 10,3)	10	The quantity of items to be mentioned in the invoice.
	,						This is mandatory only in case of goods.
A.1.2. 8	Free_Qty	01	Free Quantity	Optional	Number (Max length: 10,3)	99	Quantity of item(s), if any, given free of charge (FOC)
A.1.2. 9	Unit_Of_Me asurement	01	Unit of Measurement	Optional	String (Max length: 8)	Box	The Unit of Measurement (UOM), if any, applicable on invoiced goods.
A.1.2. 10	Item_Price	11	Item Price	Mandatory	Number (Max length: 12,3)	500.5	Price per unit item.
A.1.2. 11	Gross_Amou nt	11	Gross Amount	Mandatory	Number (Max length : 12,2)	5000	The gross price of an item (cost multiplied by quantity - rounded off to 2 decimal), exclusive of taxes.
A.1.2. 12	Item_Discou nt_Amount	0I	Item Discount Amount	Optional	Number (Max length: 12,2)	10.25	Discount amount, if any, for the item.
A.1.2. 13	Pre_Tax_Va! ue	01	Pre-Tax Value	Optional	Number (Max length: 12,2)	99.00	If pre-tax value is different from taxable value, mention the pre-tax value and taxable values separately.
							In some cases, the pre-tax value may be different from taxable value.
							For example, where old goods are exchanged for new ones (e.g. new phone supplied for INR 20,000 along with exchange of old phone, then pre-tax value would be INR 20,000 and taxable value would be INR 24,000, assuming exchange
							value of old phone is 4,000. Another example is in the case of real estate where pretax value may be different from taxable value.
A.1.2. 14	Item_Taxabl e_Value	11	Item Taxable Value	Mandatory	Number (Max length: 12,2)	5000	This is the value on which tax is computed. Value cannot be negative.
A.1.2. 15	GST_Rate	11	GST Rate	Mandatory	Number (Max length: 3,3)		The GST rate, represented as percentage that applies to the invoiced item. It will be IGST rate or sum of CGST & SGST Rates.

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A.1.2. 16	IG\$T_Amt	01	IGST Amount	Optional	Number (Max Length: 12,2)	999.45	Amount of IGST payable per item (rounded off to 2 decimals). If IGST is reported, then CGST & SGST/UTGST will be blank. For taxable supplies, either IGST or CGST & SGST/UTGST should be
							reported.
A.1.2.	CG\$T_Amt	10	CGST Amount	Optional	Number (Max Length: 12,2)	650.00	Amount of CGST payable per item (rounded off to 2 decimals).
	<i>:</i> 	•					If CGST is reported, then SGST/UTGST has to be reported and IGST will be blank.
A.1.2. 18	SGST_UTG ST_Amt	01	SGST/UTGST Amount	Optional	Number (Max length: 12,2)	650.00	Amount of SGST/UTGST payable per item(rounded off to 2 decimals).
		, ,	in the first				If SGST/UTGST is reported, then CGST must be reported and IGST will be blank.
A1.2. 19	Comp_Cess_ Rate_Ad_val orem	01	Compensation Cess Rate, Ad Valorem	Optional	Number (Max length: 3,3)	2.5%	Ad valorem Rate of GST Compensation Cess, applicable, if any
20	Comp_Cess_ Amt_ Ad_Valorem	01	Compensation Cess Amount, Ad Valorem	Optional	Number (Max length: 12,2)	56.00	GST Compensation Cess amount, ad valorem (rounded off to 2 decimals) (based on value of the item).
21	Comp. Cess. Amt. Non. A d. Valorem.	0,1	Compensation Cess Amount, Non ad valorem	Optional	Number (Max length:12,2)	23.00	GST Compensation Cess amount; computed on the basis other than value of item (i.e. specific cess amount computed based on quantity, number etc.)
22	Rate_ad_val		State Cess Rate, Ad Valorem	Optional	Number (Max length: 3,3)	1.5%	Ad valorem Rate of State/UT Cess, applicable, if any
A1.2. 23	State Cess Amt Ad Va lorem	4,970	State Cess Amount, ad valorem	Optional	Number (Max length: 12,2)	43.00	State/UT Cess amount, ad valorem (based on value of the Item)
A1.2.	State_Cess_ Amt_Non_A		State Cess Amount, non äd valorem	Optional	Number (Max length: 12,2)	12.00	State/UT Cess amount, computed on the basis other than value of item file specific cess amount computed based on quantity, number etc.)
25 6	Other_Charg es_kem_Lev	Ø 1	Other Charges (item level)	Optional	Number (Max fength: 12,2)	874.95	Any other charges applicable at item level.
							These may not be part of taxable value, e.g. in case of pure agent reimbursement.
26 c	Purchase_Or (der_Line_Re erence		Purchase Order Line Reference	Optional	String (Max length: 50)	746/ABC/01	Reference of Purchase Order Line
	tem_Total\		Item Total Amount	Mandatory	Number (Max length: 12,2)	5000	The item total value that includes all taxes; cesses, as well as other charges.
							However, this value excludes discount, if any

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1	2	3	4	5	6	7	8
A.1.2. 28	Origin_Coun try_Code	01	Code of Country of Origin	Optional	Enumerated List	DZ	This is to specify country of origin of the item, e.g. mobile phone sold in India could be manufactured in other country:
							Code of country of export as per ISO 3166-1 alpha-2 / Indian Customs EDI system (ICES).
·							List published and updated from time to time at https://www.icegate.gov.in/ Webappl/COUNTRY_ENQ
A.1.2, 29	Unique_Seri al_Number	01	Unique Serial Number	Optional	String (Max length: 20)	553	Serial number, in case of each item having a unique number.
A.1.2. 30	Product_Att ribute_Detai Is	0n	Optional		<u>Refer. A 1.5</u>		Attribute details of product
À 13	Document Total Details	1.1	en joseph Egevelen Joseph Agrick	Manda tory			(Heaver for Angexure A L.3: Document Total Details
Sr. No	Parameter Name	Cardi Apality	Description	Whethe mandat	Elergi Spearfic at libra	Sample Value	Explanation Notes
				oey or entions			
A.1.3.	Taxable_Value_Total	11	Total Taxable Value	Mandat ory	Number (Max length: 14,2)	768439.35	This is the sum of the taxable values of all the items in the document.
A.1.3. 2	IGST_Amt_ Total	01	Total IGST Amount	Optiona I	Number (Max length: 14,2)	265.50	Total IGST amount for the invoice.
							Appropriate taxes based on rule will be applicable.
				1			For example, either of CGST & SGST/UTGST or IGST will be mandatory.
٠,							As this is conditional mandatory, it is marked as optional.
A.1.3.	CGST_Am_ Total	01	Total CGST Amount	Option al	Number (Max length: 14,2)	65.45	Total CGST amount for the invoice.
-							Appropriate taxes based on rule will be applicable.
		·		·			For example, either of CGST & SGST/UTGST or IGST will be mandatory.
·			,				As this is conditional mandatory, it is marked as 'optional'
A.1.3.	SGST_UTG S'T_Amt_To	10	Total SGST/UTGST	Option al	Number (Max length : 14,2)	65.45	Total SGST/UTGST amount for the invoice.
	tal		Amount				Appropriate taxes based on rule will be applicable. For example, either of CGST &

be mandatory. As it is conditional mandatory, it is marked as 'optional' A. I.3. Comp_Cess		•-1		11114 0 1-10	, 0	11, 2020 40 (1110	,,	· · · · · · · · · · · · · · · · · · ·
A.1.3. Comp Cess 5 Amil Total Compensation Cess Amount A.1.3. State Cess 6 Amil Total Amount A.1.3. Total Cess 6 Amil Total Cess Amount A.1.3. Total Cess 6 Amil Total Amount A.1.3. Total Cess A.1.3. Total Cess Amount A.1.3. Total Cess Amount A.1.3. Total Cess Amount A.1.3. Total Cess A.1.3. Total Cess Amount A.1.3. Total Cess Anount A.1.3. Total Cess A.1.3. Total Cess Anount A.1.3. Total Cess A.1.3. Total Cess Anount A.1.4. Batch Espir A.1.5. Batch Norm A.1.6. Batch Espir A.1.7. Batch Norm A.1.8. Batch Espir A.1.8. Batch Espir A.1.9. Batch Norm A.1.8. Batch Espir A.1.9. Batch Norm A.1.8. Batch Espir A.1.9. Batch Norm A.1.8. Batch Espir A.1.9. Ba	1	. 2	3	4	5	6	7	8
A.1.3. Comp. Cess Ann. Total Compensation Control Compensation Compensation Compensation Control Compensation Compensation Compensation Control Compensation Compensation Compensation Control Compensation Compensation Control Compensation Compensation Compensation Control Compensation Compensation Control Compensation Control Compensation Control Compensation Control Compensation Control Compensation Control Cont								SGST/UTGST or IGST will be mandatory.
S _Ami_Total			-					mandatory, it is marked as
A.1.3.7 Discount_A D.1 Invoice Level Discount Amount all Invoice value and Invoice value Invoice value Invoice value Invoice value Invoice Value Invoice Value Invoice Invoice Invoice Invoice Invoice Invoice Value Invoice Value Invoice Value Invoice Value Invoice Value Invoice Invoice Invoice Invoice Value Invoice Value Invoice Value Invoice I			01	Compensation			24,95	Cess amount for the invoice (ad valorem as well as non-
A.1.3.8 Discount Amount of Italy and			01	Cess			5.45	the invoice (ad valorem as
Lest Invoice Level al 14.2) applicable on total invoice value A.1.3.9 Round Off Amount Amo	A.1.3.7	mt_Invoice_	01	Discount			100:00	any, applicable on total
A.1.3. Total Invoice 1.1 Total Invoice. Mandar Number (Max length: 745249678.50 The total value of invoice including sease/GST and rounted to two decimals maximum. A.1.3. Total Invoice (Nax length: 745249678.50 The total value of invoice including sease/GST and rounted to two decimals maximum. A.1.3. Total Invoice (Option R.) A.1.3. Total Invoice (Option R.) A.1.3. Paid Amount D.1. Paid Amount (Option R.) Paid Amount D.1. Paid Amount (Option Regit): 14.2) A.1.3. Amount D.1. Amount Due (Option Regit): 14.2) A.1.3. Batch Num R. (Option Regit): 20 A.1.4. Batch Expir Date (Option Regit): 20 A.1.4. Batch Expir Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.4. Warranty D. (O.1) Warranty Date (Option Regit): 21/11/2019 A.1.5. Regit Regits (Option Regit): 21/11/2019 A.1.5. Regit Regits (Option Regit): 21/11/2019	A.1.3.8	es_Invoice_	01		1 .		200.00	applicable on total invoice
A.1.3. Paid_Amount Du	v.1.3.9		0.1				31.21	
A.1.3. Paid_Amount Du Q.1. Amount Due Options Number (Max length: \$5729.65 The total value of hirvoice in Additional Currency Value in FCNR al. 14.2). A.1.3. Amount Du Q.1. Amount Due Options Number (Max length: \$5729.65 The total value of hirvoice in Additional Currency Value in FCNR al. 14.2). A.1.3. Amount Du Q.1. Amount Due Options Number (Max length: 4.2). A.1.4. Batch Num I.1. Batch Number Manual String (Max Length: 20). A.1.4. Batch Expir y Date A.1.4. Batch Expir y Date Option String (DD/MM/YYYY) Option String all (DD/MM/YYYY) 21/11/2019 Warranty date for the ltem, if any Date of the Batch, if any QDD/MM/YYYY) Option String all (DD/MM/YYYY)	ด้านเรี	and the second second		i. Bakata pertangan Sajatatan sa		l mosa, stillemen indicate as as con	10-4 - W	Maritie Carlo de la company
A.1.3. Total Invoice Value in FCNR al 14.2) A.1.3. Paid Amount 01 Paid Amount 12. The unit of invoice in Additional Currency NR Paid Amount 01 Paid Amount 12. The unit of invoice in Additional Currency A.1.3. Paid Amount 01 Paid Amount 12. The unit of invoice in Additional Currency A.1.3. Amount Du 01 Amount Due 12. The unit of invoice in Additional Currency A.1.3. Amount Du 01 Amount Due 13. The unit of invoice in Additional Currency A.1.3. Amount Du 01 Amount Due 14. The unit of invoice in Additional Currency A.1.3. Amount Du 01 Amount Due 15. Invoice in Additional Currency A.1.3. Batch Nuri 11 Batch Number Mandat String of Mandat String (DD/MM/YYYY) A.1.4. Batch Expir 01 Batch Expiry Dafe Dafe Option al (DD/MM/YYYY) A.1.4. Warranty D 01 Warranty Date Option al (DD/MM/YYYY) Warranty D 01 Warranty Date Option al (DD/MM/YYYY) Warranty D 01 Warranty Date Option al (DD/MM/YYYY) Warranty Date of the leten, if any							745249678.50	including taxes/GST and rounded to two decimals
A.1.3. Paid_Amoun 0.1 Paid Amount 1 Diplone Number (Max length; I4.2) A.1.3. Amount_Du 0.1 Amount Due 1 Paid Amount Due 1 Paid Amount Due 1 Paid Amount Due 1 Paid Amount Due 1 Paid Paid Paid Paid Paid Paid Paid Paid	ri.	e_Value_FC					\$5729.65	The total value of invoice in
A.1.3. Amount_Du (0.1 Amount_Due (1 Amount_D	A.1.3. 12	Paid_Amoun t	0.1	Paid Amount	Optiona		8463,50	has been paid in advance. It must be rounded to
A.1.4. Batch_Expir v_Date A.1.4. Warranty_D 0I Warranty Date Description Desc			0.1	Amount Due	Optiona.		98789.50	The outstanding amount due for payment. It must be
A.1.4. Batch_Expir 01 Batch Expiry Date Option al (DD/MM/YYYY) A.1.4. Warranty_D 01 Warranty Date Option al (DD/MM/YYYY)				s. 19. apr. Šveda Skiela Šveda				
ory (Max Length: 20) may mention batch number details: (This field is mandatory only if this section is selected) A.1.4. Batch_Expir 01 Batch Expiry Date Option al (DD/MM/YYYY) Date Option al (DD/MM/YYYY) Warranty_D 01 Warranty Date Option al (DD/MM/YYYYY) Warranty_D 01 Warranty Date Option al (DD/MM/YYYYY)								The state of the s
A.1.4. Batch_Expir 01 Batch Expiry Date Option al (DD/MM/YYYY) A.1.4. Warranty_D 01 Warranty Date Option al (DD/MM/YYYY) Warranty_D 01 Warranty Date Option al (DD/MM/YYYY)			1.1	Batch Number				may mention batch number details: (This field is mandatory only if this
A.1.4. Warranty_D 01 Warranty Date Option String 21/11/2019 Warranty date for the Item, if any.							21/11/2019	Expiry Date of the Batch, if
al (DD/MM/YYYY) any.								
		Warranty_D (01	Varranty Date				any.

1	2	3	4	5	6	7	8
A 1.5	Attribute Details of Item	0n		Option al			Header for Annexure A i.5: Attribute Details of Item
Sr. No.	Parameter Name	Cardi nality	Description	Wheth er manda tory or option	Field Specific attons	Sample Value	Explanatory notes
A.1.5. I	Attribute_N ame	01	Attribute Name	Option al	String (Max Length: 100)	Colour	Attribute Name of the item.
A.i.5. 2	Attribute_V alue	01	Attribute Value	Option al	String (Max Length: 100)	Red, green, etc.	Attribute Value of item.".

अधिसूचना

16 सितम्बर, 2020 ई0

संख्या 689/2020/6(120)/XXVII(8)/2020/CT-61-चूँिक राज्य सरकार का समाधान हो गया है कि लोक हित में ऐसा करना समीचीन है;

- अतएव, अब, राज्यपाल, उत्तराखण्ड माल और सेवा कर नियम, 2017 के नियम 48 के उपनियम (4) द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, परिषद की सिफारिशों पर, अधिसूचना सं. 330/2020/ 5(120) /XXVII (8)/2020/CT-13 तारीख 20 मई, 2020 में निम्नलिखित संशोधन करने की सहर्ष स्वीकृति प्रदान करते हैं, अर्थात्:-

उक्त अधिसूचना के पहले पैराग्राफ में-

- (i) "उन से भिन्न" शब्दों, के पहले "किसी विशेष आर्थिक जोन इकाई तथा" शब्द को अत:स्थापित किया जाएगा;
- (ii) "एक सौ करोड़ रुपये" शब्दों के लिए "पाँच सौ करोड़ रुपये" शब्द को प्रतिस्थापित किया जाएगा।

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 689/2020/6(120)/ XXVII(8)/2020/CT-61, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No. 689/2020/6(120)/XXVII(8)/2020/CT-61--WHEREAS, the State Government is satisfied that it is expedient so to do in public interest;

NOW, THEREFORE, In exercise of the powers conferred by sub-rule (4) of rule 48 of the Uttarakhand Goods and Services Tax Rules, 2017, the Governor, on the recommendations of the Council, is pleased to allow to make the following amendments in notification of the Government of Uttarakhand, No. 330/2020/5(120)/ XXVII(8)/2020/CT-13 dated 20th May, 2020, namely:—

In the said notification, in the first paragraph,

- (i) before the words "those referred to in sub-rules", the words "a Special Economic Zone unit and" shall be inserted;
- (ii) for the words "one hundred crore rupees", the words "five hundred crore rupees" shall be substituted.

अधिसूचना

16 सितम्बर, 2020 ई0

संख्या 690/2020/5(120)/XXVII(8)/2020/CT-62-राज्यपाल, उत्तराखण्ड माल और सेवा कर अधिनियम, 2017 (अधिनियम संख्या 06, वर्ष 2017) की धारा 164 द्वारा प्रदत्त शक्तियों का प्रयोग करते हुए, परिषद् की सिफारिशों पर, उत्तराखण्ड माल और सेवा कर नियम, 2017 को अग्रेत्तर संशोधित करने के लिए निम्नलिखित नियम बनाते हैं, अर्थात् :-

उत्तराखण्ड माल और सेवा कर (दसवा संशोधन) नियम, 2020

संक्षिप्त नाम और प्रारम्भ

- 1. (1) इन नियमों का संक्षिप्त नाम उत्तराखण्ड माल और सेवा कर (दसवां संशोधन) नियम, 2020 है।
 - (2) अन्यथा उपबंधित के सिवाएं ये नियम दिनांक 20 अगस्त, 2020 से प्रवृत्त होंगे।

नियम 8 में संशोधन

- 2. उत्तराखण्ड माल और सेवा कर नियम 2017 (जिसमें इसके पश्चात उक्त नियम कहा गया है) के नियम 8 में, उपनियम 4(क) के स्थान पर, 01 अप्रैल, 2020 से, निम्नलिखित उपनियम प्रतिस्थापित किया जाएगा, अर्थात: -
 - "(4क) जहां कोई आवेदक, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न हो, आधार संख्या के अभिप्रमाणन के विकल्प का चयन करता है तो, उपनियम (4) के अंतर्गत आवेदन को भरते समय, 21 अगस्त, 2020 से प्रभावी, उसकी आधार संख्या का अभिप्रमाणन किया जायेगा और उन मामलों में आवेदन को भरे जाने की तारीख, वह तारीख मानी जायेगी, जो उसकी आधार संख्या की अभिप्रमाणन की तारीख या उपनियम (4) के अंतर्गत प्ररूप जीएसटी आरईजी-01के.भाग ख में आवेदन के भरे जाने से पंद्रह दिन बाद की तारीख, दोनों में से जो भी पूर्वत्तर होगी।"

नियम 9 में संशोधन

- उत्त नियम में, नियम 9 में, 21अगस्त, 2020 से प्रभावी-
 - (i) उपनियम (1) में परंतुक के स्थान पर निम्नलिखित परंतुकों को प्रतिस्थापित किया जाएगा, अर्थात:-

"परंतु जहां कि कोई व्यक्ति, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न हो, नियम 8 के उपनियम (4क) में यथा विनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है या आधार संख्या के अभिप्रमाणन के विकल्प का चयन नहीं करता है, तो उसका रिजस्ट्रींकरण, उस व्यक्ति की उपस्थिति में, नियम 25 के अंतर्गत यथाविनिर्दिष्ट रीति के अनुसार उसके कारबार के स्थान का प्रत्यक्ष सत्यापन किये जाने के बाद, किया जायेगा:

परंतु यह और कि उचित अधिकारी, संबंधित कारणों को लिखित रूप से लेखबद्ध करते हुए और ऐसे अधिकारी के अनुमोदन से जिसका पद की संयुक्त आयुक्त के पद से नीचे नहीं है, कारबार के स्थान का प्रत्यक्ष सत्यापन किये जाने के स्थान पर, ऐसे दस्तावेजों को सत्यापन कर सकता है जिसे वह उचित समझे";

(11) उपनियम (2) में स्पष्टीकरण से पहले, निम्नलिखित परंतुक अंतःस्थापित किया जायेगा, अर्थातः=

"परंतु यह और कि जहां कोई व्यक्ति, जो कि धारा 25 की उपधारा 6 (घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न हो, नियम 8 के उपनियम (४क) में यथाविनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है या आधार संख्या के अभिप्रमाणन के विकल्प को चयन नहीं करता है, तो प्ररूप जीएसटी आरईजी-03 में नोटिस, ऐसे आवेदन को प्रस्तुत किये जाने की तारीख से इक्कीस दिन की अवधि के भीतर जारी किया जा सकेगा। ";

- (iii) उपनियम (4) में, शब्द "देगा" के स्थान पर शब्द "सकेगा" और शब्द "करेगा" के स्थान पर शब्द "कर सकेगा" प्रतिस्थापित किया जायेगा;
- (iv) उपनियम (5) के स्थान पर, निम्नलिखित उपनियम प्रतिस्थापित किया जायेगा, अर्थात:-

- "(5) यदि उचित अधिकारी कोई भी कार्रवाई करने में असफल रहता है-
 - (क) ऐसे मामले में जिसमें कि किसी व्यक्ति की आधार संख्या का अभिप्रमाणन सफलता पूर्वक हो जाता है या वह धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित है आवेदन को प्रस्तुत किये जाने की तारीख से तीन कार्य-दिवस के भीतर; या
 - (ख) ऐसे मामले में जिसमें कि कोई व्यक्ति, जो कि धारा 25 की उपधारा 6(घ) के अंतर्गत अधिसूचित व्यक्ति से भिन्न है, नियम 8 के उपनियम (4क) में यथा विनिर्दिष्ट आधार संख्या का अभिप्रमाणन की प्रक्रिया में असफल रहता है, तो उपनियम (2) के परंतुक के अंतर्गत यथाविनिर्दिष्ट अविध के भीतर, या
 - (ग) ऐसे मामले में जिसमें कि ऐसे व्यक्ति ने आधार संख्या के अभिप्रमाणन के विकल्प का चयन नहीं किया है, आवेदन की प्रस्तुत किये जाने की तारीख से इक्कीस दिन की अविध के भीतर, या
 - (घ) उपनियम (2) के अंतर्गत, आवेदक के द्वारा प्रस्तुत किये गये स्पष्टीकरण, सूचना या दस्तावेजों की प्राप्ति की तारीख सै सात कार्य दिवस के भीतर,

तो रजिस्ट्रीकरण के लिए किये गये आवेदन के बारें में यह मीना जायेगा कि उसे अनुमोदित कर दिया गया है।"

नियम 25 में 4. उक्त नियमों में, नियम 25 में, 21 अगस्त, 2020 से प्रभावी, "असफल होने के संशोधन कारण" शब्दों के पश्चात् "या आधार के अभिप्रमाणन के विकल्प का चयन न किये जाने के कारण" शब्दों अतःस्थापित किया जाएगा।

आज्ञा से, सौजन्या, सचिव।

In pursuance of the provisions of clause (3) of Article 348 of the Constitution of India, the Governor is pleased to order the publication of the following English translation of the Notification No. 690/2020/5(120)/XXVII(8)/2020/CT-62, dated September 16, 2020 for general information.

NOTIFICATION

September 16, 2020

No.690/2020/5(120)/XXVII(8)/2020/CT-62--In exercise of the powers conferred by Section 164 of the Uttarakhand Goods and Services Tax Act, 2017 (Act No. 06 of 2017), the Governor, on the recommendation of Council, is pleased to make the following rules to further amend the Uttarakhand Goods and Services Tax Rules, 2017, namely:--

The Uttarakhand Goods and Services Tax (Tenth Amendment) Rules, 2020

Short title and Commencement

- 1. (1) These rules may be called the Uttarakhand Goods and Services Tax (Tenth Amendment) Rules, 2020.
 - (2) Save as otherwise provided, they shall come into force from 20th August, 2020.

Amendment in Rule 8

2. In the Uttarakhand Goods and Services Tax Rules, 2017 (hereinafter referred to as the said rules), in rule 8, for sub-rule (4A), the following sub-rule shall be substituted with effect from 01st April, 2020, namely:-

"(4A) Where an applicant, other than a person notified under sub-section (6D) of section 25, opts for authentication of Aadhaar number, he shall, while submitting the application under sub-rule(4), with effect from 21st August, 2020, undergo authentication of Aadhaar number and the date of submission of the application in such cases shall be the date of authentication of the Aadhaar number, or fifteen days from the submission of the application in Part B of FORM GST REG-01 under sub-rule (4), whichever is earlier."

Amendment in Rule 9

3.

In the said rules, in rule 9, with effect from 21st August, 2020,(i) in sub-rule (1), for the proviso, the following provisos shall be substituted, namely:-

"Provided that where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8 or does not opt for authentication of Aadhaar number, the registration shall be granted only after physical verification of the place of business in the presence of the said person, in the manner provided under rule 25:

Provided further that the proper officer may, for reasons to be recorded in writing and with the approval of an officer not below the rank of Joint Commissioner, in lieu of the physical verification of the place of business, carry out the verification of such documents as he may deem fit.";

(ii) in sub-rule (2), before the Explanation, the following proviso shall be inserted, namely: -

"Provided that where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8 or does not opt for authentication of Aadhaar number, the notice in FORM GST REG-03 may be issued not later than twenty one days from the date of submission of the application.";

- (iii) in sub-rule (4), for the word, "shall", the word "may" shall be substituted;
- (iv) for sub-rule (5), the following sub-rule shall be substituted, namely:-
- "(5) If the proper officer fails to take any action, -
 - (a) within a period of three working days from the date of submission of the application in cases where a person successfully undergoes authentication of Aadhaar number or is notified under sub-section (6D) of section 25; or
 - (b) within the time period prescribed under the proviso to sub-rule (2), in cases where a person, other than a person notified under sub-section (6D) of section 25, fails to undergo authentication of Aadhaar number as specified in sub-rule (4A) of rule 8; or
 - (c) within a period of twenty one days from the date of submission of the application in cases where a person does not opt for authentication of Aadhaar number, or
 - (d) within a period of seven working days from the date of the receipt of the clarification, information or documents furnished by the applicant under sub-rule (2).

the application for grant of registration shall be deemed to have been approved."

Amendment in Rule 25

4. In the said rules, in rule 25, with effect from 21st August, 2020, after the words "failure of Aadhaar authentication", the words "or due to not opting for Aadhaar authentication" shall be inserted.

By Order,

SOWJANYA,

अनिल सिंह, अपर आयुक्त राज्य कर, मुख्यालय, देहरादुन।

पी0एस0यू0 (आर0ई0) 40 हिन्दी गजट/532—भाग 1—क—2020 (कम्प्यूटर/रीजियो)।



सरकारी गजट, उत्तराखण्ड

उत्तराखण्ड सरकार द्वारा प्रकाशित

रुड़की, शनिवार, दिनांक 07 नवम्बर, 2020 ई0 (कार्तिक 16, 1942 शक सम्वत्)

भाग 8 सूचना एवं अन्य वैयक्तिक विज्ञापन आदि

सूचना

मेरे पिता बख्तावर सिंह के SBI म्यूचुअल फण्ड नं0 17210776, 16638967 में मेरा नाम त्रुटिवश घर का नाम अज़य सिंह दर्ज है जबकि मेरा वास्तविक नाम अर्जुन सिंह है। मविष्य में मुझे अर्जुन सिंह पुत्र बख्तावर सिंह नाम से जाना जाये।

समस्त विधिक औपचारिकताएं मेरे द्वारा पूर्ण कर ली गई है।

अर्जुन सिंह पुत्र बख्तावर सिंह निवासी ग्राम व पोस्ट नकोट, तहसील टिहरी जिला-टिहरी गढवाल (उत्तराखण्ड)

पी0एस0यू0 (आर0ई0) 40 हिन्दी गजट/532-माग 8-2020 (कम्प्यूटर/रीजियो)। मुद्रक एवम् प्रकाशक-अपर निदेशक, राजकीय मुद्रणालय, उत्तराखण्ड, रुड़की।